

AGENDA AND REPORTS October 20, 2021 1:30 PM

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Meeting ID: 773 741 7209

STATEMENT OF COMPLIANCE WITH OPEN PUBLIC MEETINGS ACT

Governor Murphy declared both a Public Health Emergency and State of Emergency in New Jersey by Executive Order Number 103 dated March 9, 2020. On June 4, 2021 by Executive Order Number 244, the Public Health Emergency was terminated but the State of Emergency continues in force. During a period declared as a State of Emergency local public bodies may conduct Remote Public Meetings by use of electronic communications technology

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

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

CENTRAL JERSEY HEALTH INSURANCE FUND AGENDA MEETING: OCTOBER 20, 2021 1:30 PM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

FLAG SALUTE

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William Rieker, Secretary - Township of Lakewood

Diane Lapp, Executive Committee - Township of Manchester

Thomas Nolan, Chair - Borough of Brielle

Donato Nieman, Executive Committee – Montgomery Township Brian Valentino, Executive Committee– Western Monmouth MUA	
Brian Brach, Executive Committee- Manasquan RRSA	
Brian Dempsey, Executive Committee-Spring Lake Borough	
APPROVAL OF MINUTES: September 8, 2021 Open: Appendix I	
CORRESPONDENCE - None	
REPORTS:	
EXECUTIVE DIRECTOR (PERMA)	
Monthly Report	.Page 1
PROGRAM MANAGER- (Conner Strong & Buckelew)	
Monthly Reportl	Page 13
TREASURER - (Stephen Mayer)	
October 2021 Bills List (Resolution 34-21)	Page 15
October Dividend Bills List 2021l	
Treasurers Report	
Confirmation of Claims Paid/Certification of Transfers	
Ratification of Treasurers Report	
ATTORNEY (John C. Cohunduil, Eco.)	
ATTORNEY - (John C. Sahradnik, Esq.) Monthly Report	
Monthly Report	
NETWORK & THIRD PARTY ADMINISTRATOR - (Aetna)	
Monthly Reportl	Page 21
NETWORK & THIRD PARTY ADMINISTRATOR - (AmeriHealth)	
Monthly Reportl	Page 25
PRESCRIPTION ADMINISTRATOR - (Express Scripts)	
Monthly Reportl	Page 32

DENTAL ADMINISTRATOR - (Delta Dental) No Report	Page
CONSENT AGENDA	Page 34
Resolution 31-21: 2022 Budget Adoption	Page 36 Page 38
OLD BUSINESS	
NIEW DUCINIECC	

NEW BUSINESS

PUBLIC COMMENT

RESOLUTION - EXECUTIVE SESSION FOR CERTAIN SPECIFIED PURPOSES PERSONNEL - CLAIMS - LITIGATION

MEETING ADJOURNED

Central Jersey Health Insurance Fund

Executive Director's Report October 20, 2021

FINANCE AND CONTRACTS

PRO FORMA REPORTS

- Fast Track Financial Report as of August 31, 2021 (page 3)
- Ratios Report as of August 31, 2021

NOMINATING COMMITTEE

Commissioner Hubeny's last meeting was in September. Commissioner Dempsey will be moved from Alternate to Commissioner. Commissioner Hubeny was the only committee member on the nomination committee. We will need a few volunteers to make a recommendation for next year's Executive and Sub Committees.

2022 BUDGET ADOPTION

The 2022 CJHIF budget was introduced at the September meeting. There have been no changes to the budget or assessments. We will be prepared to review for the Committee.

Resolution 31-21 includes the adoption of the 2022 budget and notice of public hearing.

DIVIDEND RESOUTION

At the previous meeting, the Committee approve a dividend of a little over \$4,247,756. Since then, the members were sent decision letters to advise the Fund how to receive their dividends. Checks will be included in the bills lists. All others will be handled accordingly.

To ratify, resolution 32-21 approves this dividend. Lakewood's dividend was approved at the prior meeting.

CONTRACT AWARD RESOLUTIONS - EUS SERVICES

State-wide negotiations provided great savings for our TPAs and Medicare Advantage providers. Resolution 33-21 awards these contracts and certifies the process to file with the State.

DIRECT BILL COUPONS - RETIREES AND COBRA

Benefits Express requires at least 90 days to guarantee updated direct bill retiree coupons and ACH debits by January 1. Since the budget is just being adopted, that timeframe cannot be met. PERMA will work diligently with BE to expedite the coupons, but there is a chance there will be a delay. In preparation, the attached communication will be sent to all direct billed members in the next month.

		CENT	RAL JERSEY	HEALTH INSURAN	CE FUND	
-				FAST TRACK REPORT	r	
			AS OF	August 31, 2021		
			THIS	YTD	PRIOR	FUND
_			MONTH	CHANGE	YEAR END	BALANCE
UNI	DERWRITING INCO	OME	3,682,906	29,857,781	741,106,666	770,964,447
. CLAI	IM EXPENSES					
	Paid Claims		3,011,200	23,271,090	603,997,730	627,268,820
	IBNR		59,695	305,343	2,964,000	3,269,343
	Less Specific Exces	S	-	(456,036)	(17,533,856)	(17,989,892
	Less Aggregate Exc	ess	-	-	(1,000,000)	(1,000,000
TOT	TAL CLAIMS		3,070,895	23,120,397	588,427,874	611,548,271
EXPE	ENSES					
	MA & HMO Premiu	ms	183,947	1,483,358	18,384,885	19,868,24
	Excess Premiums		147,864	1,197,075	34,955,796	36,152,87
	Administrative		218,842	1,982,276	42,605,067	44,587,34
TOT	TAL EXPENSES		550,652	4,662,708	95,945,748	100,608,456
UND	DERWRITING PROFIT	(1-2-3)	61,359	2,074,676	56,733,044	58,807,720
	ESTMENT INCOME	•	(500)	22,645	3,759,838	3,782,48
	DEND INCOME		0	446,793	7,453,136	7,899,92
		5+6)	60,858	2,544,114	67,946,018	70,490,132
	DEND	·	3,000,000	3,000,000	48,054,721	51,054,72
						31,034,72
	nsferred Surplus ATUTORY SURPLUS	(7.9.0)	(2.020.142)	(455.996)	1 9,891,297	19,435,411
SIA	ATOTORY SURPLUS	(7-8+9)	(2,939,142)	(455,886)	19,891,297	19,435,411
			SURPLUS (DE	FICITS) BY FUND YEAR		
Close	ed	Surplus	(12,785)	277,073	9,469,850	9,746,92
		Cash	434,504	145,675	9,826,240	9,971,91
2020	0	Surplus	(129,567)	306,043	2,725,675	3,031,71
		Cash	(50,518)	(917,041)	3,616,904	2,699,86
LAKE	EWOOD	Surplus	(2,939,313)	(2,253,742)	7,695,772	5,442,03
		Cash	(898,882)	1,223,018	6,813,446	8,036,46
2021	1	Surplus	142,524	1,214,740		1,214,74
		Cash	(315,921)	390,670		390,67
OTAL	SURPLUS (DEFICIT	rs)	(2,939,142)	(455,886)	19,891,297	19,435,411
			(830,816)	842,322	20,256,589	21,098,911
OTAL	CASH					
OTAL	CASH			LYSIS BY FUND YEAR		
		IMS	CLAIM ANA		517 844 758	518 024 46
тот	AL CLOSED YEAR CLA	IMS		LYSIS BY FUND YEAR 179,709	517,844,758	518,024,46
тот	AL CLOSED YEAR CLA D YEAR 2020	IMS	12,576	179,709		
тот	AL CLOSED YEAR CLA D YEAR 2020 Paid Claims	IMS	CLAIM ANA 12,576 134,507	179,709 2,222,327	21,922,234	
тот/	AL CLOSED YEAR CLA D YEAR 2020 Paid Claims IBNR		12,576 134,507 0	2,222,327 (2,109,000)	21,922,234 2,109,000	24,144,5 6 -
тот/	PAL CLOSED YEAR CLA D YEAR 2020 Paid Claims IBNR Less Specific Exces	S	12,576 134,507 0	2,222,327 (2,109,000) (407,330)	21,922,234 2,109,000 (211,669)	24,144,5 6 -
TOTA	Paid Claims IBNR Less Specific Exces Less Aggregate Exc	S	12,576 134,507 0 0	2,222,327 (2,109,000) (407,330)	21,922,234 2,109,000 (211,669) 0	24,144,56 - (618,99
TOTA	Paid Claims IBNR Less Specific Exces Less Aggregate Exc	S	12,576 134,507 0	2,222,327 (2,109,000) (407,330)	21,922,234 2,109,000 (211,669)	24,144,56 - (618,99
TOTA	Paid Claims IBNR Less Specific Exces Less Aggregate Exc AL FY 2020 CLAIMS EWOOD	S	12,576 134,507 0 0 0 134,507	2,222,327 (2,109,000) (407,330) 0 (294,004)	21,922,234 2,109,000 (211,669) 0 23,819,564	24,144,56 - (618,99 23,525,56
TOTA	AL CLOSED YEAR CLA D YEAR 2020 Paid Claims IBNR Less Specific Exces Less Aggregate Exc AL FY 2020 CLAIMS EWOOD Paid Claims	S	12,576 134,507 0 0 0 134,507	2,222,327 (2,109,000) (407,330) 0 (294,004)	21,922,234 2,109,000 (211,669) 0 23,819,564 48,467,839	24,144,56 - (618,99 23,525,56 55,442,19
TOTA	Paid Claims IBNR Less Specific Exces Less Aggregate Exc AL FY 2020 CLAIMS EWOOD Paid Claims IBNR	s ess	12,576 134,507 0 0 0 134,507 899,059 20,892	2,222,327 (2,109,000) (407,330) 0 (294,004) 6,974,354 211,765	21,922,234 2,109,000 (211,669) 0 23,819,564 48,467,839 855,000	24,144,56 - (618,99 23,525,56 55,442,19 1,066,76
TOTA	Paid Claims Less Specific Exces Less Aggregate Exc AL FY 2020 CLAIMS EWOOD Paid Claims IBNR Less Specific Exces Less Aggregate Exc Less Aggregate Exc AL FY 2020 CLAIMS EWOOD Paid Claims IBNR Less Specific Exces	s ess	12,576 134,507 0 0 0 134,507 899,059 20,892 0	2,222,327 (2,109,000) (407,330) 0 (294,004) 6,974,354 211,765 (48,524)	21,922,234 2,109,000 (211,669) 0 23,819,564 48,467,839 855,000 (2,559,288)	24,144,56 - (618,99 23,525,56 55,442,19 1,066,76
TOT/	Paid Claims Less Specific Exces Less Aggregate Exc AL FY 2020 CLAIMS EWOOD Paid Claims IBNR Less Specific Exces Less Aggregate Exc	s ess	CLAIM ANA 12,576 134,507 0 0 0 134,507 899,059 20,892 0 0	2,222,327 (2,109,000) (407,330) 0 (294,004) 6,974,354 211,765 (48,524)	21,922,234 2,109,000 (211,669) 0 23,819,564 48,467,839 855,000 (2,559,288) 0	24,144,56 - (618,99 23,525,56 55,442,19 1,066,76 (2,607,81
TOT/	Paid Claims Less Specific Exces Less Aggregate Exc Paid Claims IBNR Less Specific Exces Less Aggregate Exc Pal FY 2020 CLAIMS EWOOD Paid Claims IBNR Less Specific Exces Less Aggregate Exc Pal LAKEWOOD 2021	s ess	12,576 134,507 0 0 0 134,507 899,059 20,892 0	2,222,327 (2,109,000) (407,330) 0 (294,004) 6,974,354 211,765 (48,524)	21,922,234 2,109,000 (211,669) 0 23,819,564 48,467,839 855,000 (2,559,288)	24,144,56 - (618,99 23,525,56 55,442,19 1,066,76 (2,607,81
TOT/	Paid Claims Less Specific Exces Less Aggregate Exc AL FY 2020 CLAIMS EWOOD Paid Claims IBNR Less Specific Exces Less Aggregate Exc	s ess	CLAIM ANA 12,576 134,507 0 0 0 134,507 899,059 20,892 0 0	2,222,327 (2,109,000) (407,330) 0 (294,004) 6,974,354 211,765 (48,524)	21,922,234 2,109,000 (211,669) 0 23,819,564 48,467,839 855,000 (2,559,288) 0	24,144,56 - (618,99 23,525,56 55,442,19 1,066,76 (2,607,81
TOT/	Paid Claims Less Specific Exces Less Aggregate Exc Paid Claims IBNR Less Specific Exces Less Aggregate Exc Pal FY 2020 CLAIMS EWOOD Paid Claims IBNR Less Specific Exces Less Aggregate Exc Pal LAKEWOOD 2021	s ess	CLAIM ANA 12,576 134,507 0 0 0 134,507 899,059 20,892 0 0	2,222,327 (2,109,000) (407,330) 0 (294,004) 6,974,354 211,765 (48,524) 0 7,137,596	21,922,234 2,109,000 (211,669) 0 23,819,564 48,467,839 855,000 (2,559,288) 0	24,144,56 - (618,99 23,525,56 55,442,19 1,066,76 (2,607,81
TOT/	Paid Claims IBNR Less Specific Exces Less Aggregate Exc Paid Claims IBNR Less Specific Exces Less Aggregate Exc Paid Claims IBNR Less Specific Exces Less Aggregate Exc IBNR Less Specific Exces Less Aggregate Exc Paid Claims Less Specific Exces Less Aggregate Exc Paid LAKEWOOD 2021 D YEAR 2021	s ess	12,576 134,507 0 0 0 134,507 899,059 20,892 0 0 919,950	2,222,327 (2,109,000) (407,330) 0 (294,004) 6,974,354 211,765 (48,524) 0 7,137,596	21,922,234 2,109,000 (211,669) 0 23,819,564 48,467,839 855,000 (2,559,288) 0	24,144,56 - (618,99 23,525,56 55,442,19 1,066,76 (2,607,81 53,901,14
TOT/	Paid Claims IBNR Less Specific Exces Less Aggregate Exc AL FY 2020 CLAIMS EWOOD Paid Claims IBNR Less Specific Exces Less Aggregate Exc AL FA 2020 CLAIMS EWOOD Paid Claims IBNR Less Specific Exces Less Aggregate Exc AL LAKEWOOD 2021 D YEAR 2021 Paid Claims	s ess s ess CLAIMS	12,576 134,507 0 0 0 134,507 899,059 20,892 0 0 919,950 1,965,058	2,222,327 (2,109,000) (407,330) 0 (294,004) 6,974,354 211,765 (48,524) 0 7,137,596	21,922,234 2,109,000 (211,669) 0 23,819,564 48,467,839 855,000 (2,559,288) 0	24,144,56 - (618,99 23,525,56 55,442,19 1,066,76 (2,607,81 53,901,14 13,894,51 2,202,57
TOT/	Paid Claims IBNR Less Specific Exces Less Aggregate Exc AL FY 2020 CLAIMS EWOOD Paid Claims IBNR Less Specific Exces Less Aggregate Exc AL Lakewood 2021 Paid Claims ID YEAR 2021 Paid Claims IBNR	s ess claims	12,576 134,507 0 0 0 134,507 899,059 20,892 0 0 919,950 1,965,058 38,803	2,222,327 (2,109,000) (407,330) 0 (294,004) 6,974,354 211,765 (48,524) 0 7,137,596	21,922,234 2,109,000 (211,669) 0 23,819,564 48,467,839 855,000 (2,559,288) 0	24,144,56 - (618,99) 23,525,56 55,442,19 1,066,76 (2,607,81 53,901,14 13,894,51 2,202,57
TOT/ LAKE	Paid Claims IBNR Less Specific Exces Less Aggregate Exc AL FY 2020 CLAIMS EWOOD Paid Claims IBNR Less Specific Exces Less Aggregate Exc AL Lakewood 2021 Paid Claims IBNR Less Specific Exces Less Aggregate Exc AL Lakewood 2021 Paid Claims IBNR Less Specific Exces	s ess claims	12,576 134,507 0 0 0 134,507 899,059 20,892 0 0 919,950 1,965,058 38,803 0	2,222,327 (2,109,000) (407,330) 0 (294,004) 6,974,354 211,765 (48,524) 0 7,137,596 13,894,518 2,202,578 0	21,922,234 2,109,000 (211,669) 0 23,819,564 48,467,839 855,000 (2,559,288) 0	518,024,467 24,144,560 - (618,999 (23,525,567 55,442,193 1,066,769 (2,607,817 (3,901,147 13,894,518 2,202,578 (16,097,096

CENTRAL JERSEY HEALTH INSURA	NCE FUND														
RATIOS															
												FY202	21		
INDICES	2020		JAN		FEB	_	MAR		APR	MAY	_	JUN	JUL	_	AUG
Cash Position	20,256,589	Ś	16,969,190	ċ	17,230,017	ć	20,457,346	خ	21 522 019	\$ 22,518,667	ć	22,391,403	\$ 21,929,727	ċ	21,098,911
IBNR	2,964,000	-	2,996,313		3.029.029		3,053,372	-		\$ 3,169,764			\$ 3,209,648		3,269,343
Assets	24,302,257	-	23,764,493		24,188,883	-	24,903,067			\$ 25,338,880			\$ 26,040,146		26,164,859
Liabilities	4,410,965	_	4,151,898		4,010,784		4,051,229			\$ 4,135,560		3,622,829			6,729,453
Surplus	19,891,292	-	19,612,595		20,178,099		20,851,839			\$ 21,203,320			\$ 22,374,548		
Claims Paid Month	3,368,629	\$	3,388,155	\$	2,595,592	\$	2,858,043	\$	3,372,930	\$ 2,525,276	\$	2,679,685	\$ 2,852,442	\$	3,012,319
Claims Budget Month	3,228,961	\$	3,154,427	\$	3,153,877	\$	3,154,925	\$	3,160,589	\$ 3,155,720	\$	3,146,370	\$ 3,086,169	\$	3,088,444
Claims Paid YTD	32,078,507	\$	3,388,155	\$	5,983,746	\$	8,841,789	\$	12,214,720	\$ 14,739,996	\$	17,419,681	\$ 20,272,122	\$	23,284,442
Claims Budget YTD	38,747,532	\$	3,154,427	\$	6,308,304	\$	9,463,229	\$	12,623,818	\$ 15,779,538	\$	18,925,908	\$ 22,012,077	\$	25,100,521
RATIOS															
Cash Position to Claims Paid	6.01		5.01		6.64		7.16		6.38	8.92		8.36	7.69		7.00
Claims Paid to Claims Budget Month	1.04		1.07		0.82		0.91		1.07	0.8		0.85	0.92		0.98
Claims Paid to Claims Budget YTD	0.83		1.07		0.95		0.93		0.97	0.93		0.92	0.92		0.93
Cash Position to IBNR	6.83		5.66		5.69		6.7		6.96	7.10		7.06	6.83		6.45
Assets to Liabilities	5.51		5.72		6.03		6.15		6.06	6.13		7.12	7.10		3.89
Surplus as Months of Claims	6.16		6.22		6.4		6.61		6.52	6.72		7.04	7.25		6.29
IBNR to Claims Budget Month	0.92		0.95		0.96		0.97		0.98	1		1.01	1.04		1.06

Central Jersey Health Insurance Fund 2021 Budget Report

as of August 31, 2021

				Cumulative	\$ Variance	% Varaiance
Expected Losses	Cumulative	Annual	Latest Filed	Expensed		
Medical Claims AmeriHealth 12/31 Rene	22,780	39,364	8,060			
Medical Claims AmeriHealth 6/30 Renew	215,548	331,436	347,319			
Medical Claims Aetna 12/31 Renewal	11,618,164	17,391,858	18,336,685			
Medical Claims Aetna 6/30 Renewal	487,710	641,538	334,875			
Subtotal Medical Claims	12,344,202	18,404,196	19,026,939	11,237,784	1,123,752	9%
Prescription Claims 12/31 Renewal	4,675,393	7,000,863	7,280,833			
Prescription Claims 6/30 Renewal	192,211	262,791	189,578			
Less Rx Rebates	(973,520)	(1,452,730)	(1,494,082)	2067.202	2 < 004	10
Subtotal Prescription Claims	3,894,084	5,810,924	5,976,329	3,867,203	26,881	19
Dental Claims 12/31 Renewal	1,156,708	1,730,493	1,750,783			
Dental Claims 6/30 Renewal	14,942	22,446	0	005.400	.=	1-0
Subtotal Dental Claims	1,171,650	1,752,939	1,750,783	992,109	179,541	15%
Vision Claims	17,334	25,919	23,233	Included in Med	lical Claims	
Lakewood SIR Claims	7045-0-	0.070.075	0.005 == :	7.37 6 * 7.5	-12	
Medical	5,916,586	8,859,950	8,805,656	5,273,922	642,664	119
Prescription	1,756,665	2,630,811	2,608,383	1,863,673	(107,008)	
Subtotal Claims	25,100,521	37,484,739	38,191,323	23,234,692	1,865,829	7%
Medicare Advantage / EGWP	1,100,332	1,655,046	1,664,316	1,459,349	5,359	0%
Medicare Advantage - Rx	364,376	549,922	, ,	Included in Med		
Ů			-			
DMO Premiums	25,056	37,799	35,343	24,009	1,048	4%
Reinsurance						
Specific	519,101	774,669	780,940			
Lakewood - ICH	677,413	1,014,352	788,028			
Subtotal Reinsurance	1,196,515	1,789,021	1,568,968	1,197,075	(560)	0%
Loss Fund Contingency	105,777	158,665	158,665	0	105,777	100%
Total Loss Fund	27,892,577	41,675,191	42,131,781	25,915,124	1,977,452	7%
Expenses						
Legal	24,287	36,430	36,430	24,288	(1)	0%
Treasurer	8,160	12,240	12,240	8,160	-	0%
Administrator	265,177	397,903	395,164	265,479	(302)	09
Program Manager	888,622	1,328,194	1,317,540	903,758	(5,136)	
Actuary	10,667	16,000	16,000	10,666	(5,130)	0%
Auditor	13,665	20,498	20,498	13,665	0	09
TPA - Aetna	604,616	902,854	909,224	612,612	(579)	09
TPA - AmeriHealth	7,417	11,492		Included above i		,
Plan Documents	10,000	15,000	15,000	Included in Prog		
Dental TPA	52,191	78,187	77,239	52,201	(9)	09
Wellness	83,333	125,000	125,000	72,917	10,416	120
Affordable Care Act	6,375	9,525	9,516	10,563	(4,188)	-66%
A4 Retiree Surcharge	13,036	18,038	24,688	13,352	(315)	
Misc/Cont	14,123	21,185	21,185	3,812	10,312	730
T	2004 (70	2 202 - 15	# 000 TOT	4 004 4=4	40.40=	
Total Expenses	2,001,670	2,992,545	2,989,503	1,991,472	10,198	1%
Total Budget	29,894,246	44,667,737	45,121,284	27,906,596	1,987,650	79
Iour Duuger	47,U7T,4TU	TT,001,131	70,141,404	21,700,370	1,707,030	, ,

CENTRAL JERSEY HEALTH INSURANCE FUND 2022 Budget Presentation

Following is the 2022 budget reflecting an average assessment decrease of .56%.

CLAIMS FUND

The Actuary reviewed the Fund's experience through 6/30/2021 and compared how the claims performed over the past year to the first half of 2021. Both medical and prescription data showed that the claims are running as expected prior to the COVID impacted months (March 2020 – June 2020). The following results have been included the budget:

Medical Claims: As done in prior years, the Aetna and Amerihealth projections are blended and resulting in an overall increase of 4.19%.

Prescription Claims: Rx claims are projected to decrease slightly. The new ESI contract is expected to provide significant savings and deeper rebates. The projection includes some of the discounted contract and the rebates have been increased from 20% to 30% of Rx spend.

Dental Claims: Dental claims are staying flat, but the fully insured DMO plans will be increasing 5%.

REINSURANCE AND INSURED PROGRAMS

Reinsurance: The overall decrease for reinsurance is -6.9%. The stop loss industry is experience higher increases than prior years. The CJHIF has had consistently good experience in the MRHIF which is reducing this line beyond industry standard.

Medicare Advantage: At the prior meeting, the Fund agreed to accept the Aetna Medicare Advantage renewal at the State level, which will not increase in 2022.

CONTRACTS AND EXPENSES

The Professional Services RFP responses were reviewed by the Finance and Contracts Committee. There were no competing responses and all fees requested in the RFPs were included in this budget. Most are increasing 2%, yet because of positive negotiations with Aetna, their TPA fees are decreasing 14%.

LAKEWOOD

As in prior years, Lakewood is separately indemnified. Its renewal is below:

Claims Funds – The Fund Actuary reviewed Lakewood's claims independent of the rest of the members. Their Medical claims are projected to decrease about 3%, yet the budget includes a flat

renewal as we wait for the final stop loss renewal. The Prescription is increasing about 17%, but with the 30% rebates, the prescription renewal will be decreasing.

Stop Loss - the Stop Loss renewal has yet to be received, but a 15% increase has been included.

ASSESSMENTS

Assessments are prepared using Fund policy developed over the last several years, including +/- 2.5% for loss ratio experience over the past 3 years. Most members are receiving a credit.

- Medical and Prescription increasing by 1%
- Dental billing is flat
- DMO rates will increase 5%
- Lakewood medical and rx will be flat pending confirmation of stop loss charges

2 Certified Budget		and Print date	31-Aug-21				
Census:		rint date	31-Aug-21				
Census:	-	6	0 II 0 0 b	_		Carrana Fred	
200	+		All Member			Census Excl	
Medical AmeriHealth		23		276		23	2
Medical Aetna		1,564		18,768		1,100	13,20
Rx		1,651		19,812		1,187	14,2
Dental		2,090		25,080		1,475	17,70
Vision Aetna		133		1,596		133	1,59
Medicare Advantage - Medical	-	647		7,764		524	6,2
Medicare Advantage - Rx Only (Brick)		262		3,144		262	3,1
Rx No Medical (Incl in Rx above)		505		6,060		505	6,0
Dental No Med No Rx (Incl in Dental above)		1123		13,476		962	11,54
DMO Only		72		864		72	80
Medicare Advantage Only		185		2,220		160	1.9
Medicare Advantage METRO Only		0		2,224		100	2,5
	202	21 Annualized					
LINE ITEMS		Budget	2022 Propo	sed Budget		\$ Change	% Change
Medical Claims AmeriHealth 12/31 Renewal	s	31,946	S	34,607	\$	2,661	8.33
Medical Claims AmeriHealth 6/30 Renewal	s	320,287	s	320,730	S	443	0.14
Medical Claims Aetna 12/31 Renewal	s	17,345,798	S	18,101,481	S	755.683	4.3
Medical Claims Aetna 6/30 Renewal	S	405,312	S	404,513	S	(799)	-0.2
Subtotal Medical Claims	\$	18,103,343		18,861,331	\$	757,988	4.19
Prescription Claims 12/31 Renewal	S	6,982,525	\$	6,938,420	S	(44,105)	-0.6
Prescription Claims 6/30 Renewal	s	193,247	s	190,275	s	(2,972)	-1.5
Subtotal Prescription Claims	s	7,175,772	s	7,128,695	\$	(47,077)	-0.66
	1	.,,	-	,,,	-	(21,211)	
Lakewood SIR Claims							
Medical	\$	8,897,203	S	8,890,891	S	(6,312)	-0.0
Prescription	S	2,642,062	\$	3,090,413	S	448,351	16.9
•						-	
Less Rx Rebates	s	(1,435,154)	S	(3,065,732)	S	(1,630,578)	113.6
				,, ,			
Dental Claims 12/31 Renewal	S	1,732,189	\$	1,732,189	S	-	0.0
Dental Claims 6/30 Renewal	S	22,513	S	22,513	\$	-	0.0
Subtotal Dental Claims	\$	1,754,702	s	1,754,702	\$	-	0.00
Vision Claims	\$	25,222	S	25,222	\$	-	0.0
Subtotal Claims	\$	37,163,150	\$ 3	36,685,522	\$	(477,628)	-1.2
Medicare Advantage / EGWP	\$	1,651,748	\$	1,651,748	\$	-	0.0
Medicare Advantage - Rx	\$	555,576	\$	555,576	\$	-	0.0
DMO Premiums	\$	37,500	\$	39,375	\$	1,875.96	5.0
Reinsurance							
Specific	\$	761,280	\$	708,768	\$	(52,512)	-6.9
Lakewood - ICH	\$	1,019,999	\$	1,172,999	\$	153,000	15.0
Subtotal Reinsurance	\$	1,781,279	\$	1,881,767	\$	100,488	5.6
	-						
Loss Fund Contingency	\$	158,665	\$	381,099	\$	222,434.00	140.1
T.II. E.I	s	43.045.030	•	41.105.005	•	(152.021)	
Total Loss Fund	3	41,347,918	\$ 4	41,195,087	S	(152,831)	-0.3
Expenses	+						
•	s	36,430	S	26.420	S		0.0
Legal Treasurer	\$	12,240	S	36,430 12,500	5	260	2.1
Administrator	\$	398,472	S	406,453	S	7,982	2.0
Program Manager	S	1,326,310		1,352,806	S	26,496	2.0
Actuary	\$	16,000	S	16,300	S	300	1.5
Actuary	\$	20,498	-	20,000	\$	(498)	-2.4
TPA - AmeriHealth	\$	11,247		11,247	S	(498)	0.0
TPA - Antenneauti	\$	893,683		762,307	\$	(131,376)	-14.7
Plan Documents	s	15,000	S	15,000	S	(131,370)	0.0
Dental TPA	\$	78,250	S	78,250	S		0.0
Wellness	\$	125,000	\$	125,000	S	-	0.0
Affordable Care Act	\$	9,427	S	9,427	S		0.0
A4 Retiree Surcharge	s	13,456	S	15,592	S	2,135	15.8
Misc/Cont	s	21,185	S	21,185	S	2,155	0.0
	Ť	21,103	_	21,103	-		0.0
Total Expenses	\$	2,977,198	\$	2,882,497	S	(94,701)	-3.1
	-	a,> / /,120	-	2,002,42/	_	(54,701)	-3.1
	+		H				
Total Budget	\$	44,325,116	\$	44,077,584	S	(247,532)	-0.5

Central Jersey Municipal Employee Benefits Fund															
2022 ASSESSMENTS ANNUALIZED vs PROPOSED															
	Annualized Assessments FY2021 Proposed Assessments FY2022			Difference \$			Difference %		Certified Assessments FY2022		2022				
Group Name	Member Billed	Direct Billed	Total	Member Billed	Direct Billed	Total	Member Billed	Direct Billed	Total	Member Billed	Direct Billed	Total	Member Billed	Direct Billed	Total
Aberdeen	3,264,252		3,264,252	3,205,164	-	3,205,164	(59,088)	-	(59,088)	-1.81%	0.00%	-1.81%	3,205,164	-	3,205,164
Allentown	192,948	-	192,948	189,528	-	189,528	(3,420)	-	(3,420)	-1.77%	0.00%	-1.77%	189,528	-	189,528
Asbury Park City	92,496	912	93,408	92,784	912	93,696	288	-	288	0.31%	0.00%	0.31%	92,784	912	93,696
Atlantic Highlands Borough	1,032,180	-	1,032,180	1,015,380	-	1,015,380	(16,800)	-	(16,800)	-1.63%	0.00%	-1.63%	1,015,380	-	1,015,380
Barnegat Light	15,204	-	15,204	15,204	-	15,204	-	-	-	0.00%	0.00%	0.00%	15,204	-	15,204
Bedminster Township	785,256	40,116	825,372	809,880	41,376	851,256	24,624	1,260	25,884	3.14%	3.14%	3.14%	809,880	41,376	851,256
Brick Township	3,871,224	3,288	3,874,512	3,772,980	3,204	3,776,184	(98,244)	(84)	(98,328)	-2.54%	-2.55%	-2.54%	3,772,980	3,204	3,776,184
Brick Twp Housing Authority	54,288	-	54,288	54,288	-	54,288	-	-	-	0.00%	0.00%	0.00%	54,288	-	54,288
Brielle Borough	879,624	38,424	918,048	870,660	37,932	908,592	(8,964)	(492)	(9,456)	-1.02%	-1.28%	-1.03%	870,660	37,932	908,592
Eatontown Sewerage Authority	153,840		153,840	151,272	-	151,272	(2,568)	-	(2,568)	-1.67%	0.00%	-1.67%	151,272	-	151,272
Englishtown	11,772	-	11,772	11,772	-	11,772	-	-	-	0.00%	0.00%	0.00%	11,772	-	11,772
Harvey Cedars	23,796	1,188	24,984	23,796	1,188	24,984	-	-	-	0.00%	0.00%	0.00%	23,796	1,188	24,984
Highland Elementary School	24,516	780	25,296	24,516	780	25,296		-	-	0.00%	0.00%	0.00%	24,516	780	25,296
Jackson Township	62,340		62,340	62,340	-	62,340	-	-	-	0.00%	0.00%	0.00%	62,340	-	62,340
Keyport	28,416		28,416	28,416	-	28,416	-	-	-	0.00%	0.00%	0.00%	28,416	-	28,416
Lakewood Township	13,901,004	18,180	13,919,184	13,869,912	18,156	13,888,068	(31,092)	(24)	(31,116)	-0.22%	-0.13%	-0.22%	13,869,912	18,156	13,888,068
Manasquan	45,396	1,740	47,136	45,396	1,740	47,136	-	-		0.00%	0.00%	0.00%	45,396	1,740	47,136
Manasquan River Regional Sewerage Authority	375,624		375,624	369,132	-	369,132	(6,492)	-	(6,492)	-1.73%	0.00%	-1.73%	369,132	-	369,132
Manchester Township	260,460	3,000	263,460	260,460	3,000	263,460	-	-	-	0.00%	0.00%	0.00%	260,460	3,000	263,460
Matawan	74,484	468	74,952	74,484	468	74,952	-	-		0.00%	0.00%	0.00%	74,484	468	74,952
Montgomery Township	2,390,076	158,100	2,548,176	2,348,916	154,776	2,503,692	(41,160)	(3,324)	(44,484)	-1.72%	-2.10%	-1.75%	2,348,916	154,776	2,503,692
Oceanport	883,872	-	883,872	870,960	-	870,960	(12,912)	-	(12,912)	-1.46%	0.00%	-1.46%	870,960	-	870,960
Plumsted MUA	29,952	-	29,952	30,192	-	30,192	240	-	240	0.80%	0.00%	0.80%	30,192	-	30,192
Plumsted Township	403,716		403,716	396,960	-	396,960	(6,756)	-	(6,756)	-1.67%	0.00%	-1.67%	396,960	-	396,960
Red Bank	3,617,376	41,520	3,658,896	3,651,384	41,904	3,693,288	34,008	384	34,392	0.94%	0.92%	0.94%	3,651,384	41,904	3,693,288
Sayreville Borough	5,833,764	21,228	5,854,992	5,892,648	21,456	5,914,104	58,884	228	59,112	1.01%	1.07%	1.01%	5,892,648	21,456	5,914,104
Seaside Heights BOE	38,280		38,280	38,280	-	38,280	-	-	-	0.00%	0.00%	0.00%	38,280	-	38,280
Ship Bottom Borough	32,616	624	33,240	32,616	624	33,240	-	-	-	0.00%	0.00%	0.00%	32,616	624	33,240
Shrewsbury Township	41,484	-	41,484	42,204	-	42,204	720	-	720	1.74%	0.00%	1.74%	42,204	-	42,204
South River	2,073,240	18,672	2,091,912	2,038,380	18,336	2,056,716	(34,860)	(336)	(35,196)	-1.68%	-1.80%	-1.68%	2,038,380	18,336	2,056,716
Spring Lake	51,564		51,564	51,564	-	51,564	-	-		0.00%	0.00%	0.00%	51,564		51,564
Toms River MUA	1,023,252	12,972	1,036,224	1,041,312	12,972	1,054,284	18,060	-	18,060	1.76%	0.00%	1.74%	1,041,312	12,972	1,054,284
Tuckerton Borough School District	965,136	10,992	976,128	948,816	10,812	959,628	(16,320)	(180)	(16,500)	-1.69%	-1.64%	-1.69%	956,976	10,902	967,878
West Long Branch	1,325,292		1,325,292	1,301,856	-	1,301,856	(23,436)	-	(23,436)	-1.77%	0.00%	-1.77%	1,301,856		1,301,856
Western Monmouth Utilities Authority	73,740	756	74,496	73,740	756	74,496	-	-		0.00%	0.00%	0.00%	73,740	756	74,496
Totals:	43,932,480	372,960	44,305,440	43,707,192	370,392	44,077,584	(225,288)	(2,568)	(227,856)	-0.51%	-0.69%	-0.51%	43,715,352	370,482	44,085,834



RE: Benefit Express 2022 Payment Coupons

Please be aware that your 2022 payment coupon books will be delayed and will arrive after your January payment is due.

In order to maintain your coverage, you and your eligible dependents should pay the same <u>2021 monthly payment</u> for all applicable lines of coverage that you received through the Health Insurance Fund for each month until the 2022 coupons arrive.

Shortly after you receive the 2022 coupon book, you will receive a reconciliation of your 2022 premium balance/credit. Upon receipt, please update your future payment amounts and include any owed balance.

If your monthly benefits are paid automatically (ACH), the 2021 payment may be deducted until the 2022 rate is available. When the new rate is available, the next ACH debit will include the new 2022 rate and the under/over payment from the prior month(s).

For Example: The 2021 Medical rate is \$50; the 2022, Medical rate is \$60

January Payment: \$50

February Payment: \$60 + \$10 = \$70

March Payment: \$60

NOTE: Your coverage will not be impacted!

If you have any questions about your 2022 payment coupons, please reach out to Benefits Express at 877-837-5017.

REGULATORY CENTRAL JERSEY HEALTH INSURANCE FUND YEAR: 2021 AS OF October 1, 2021

Monthly Items Filing Status

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

Indemnity and Trust Compliance List included in agenda

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

Unaudited Financials 6/30/21 Filed Annual Audit 12/31/20 Filed

N/A **Budget Changes 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

Fund Professional		Contract Received	Insurance Received	Contract Term
Administration	PERMA	Yes	Yes	1/1/2019 - 12/31/2021
Attorney	Jack Sahradnick	Yes	Yes	1/1/2021 - 12/31/2021
Treasurer	Steve Mayer	Yes	Yes	1/1/2021 - 12/31/2021
Auditor	Mercadien	Yes	Yes	1/1/2021 - 12/31/2021
Program Manager	Conner Strong	Yes	Yes	1/1/2019 - 12/31/2021
Actuary	John Vataha	Yes	Yes	1/1/2021 - 12/31/2021
TPA - Aetna		Yes	in progress	1 year renewal negotiated
TPA - AmeriHealth		Yes	in progress	1 year renewal negotiated
TPA - Delta Dental		Yes	in progress	1 year renewal negotiated

Indemnity & Trust Compliance Listing

Member	I&T end date
Borough of Sayreville	in progress
Ship Bottom Borough	in progress
Brick Twp Housing Authority	12/31/2021
South River	12/31/2021
Oceanport	12/31/2021
Aberdeen	12/31/2021
Brick Township	12/31/2021
Eatontown Sewerage Authority	12/31/2021
Englishtown	12/31/2021
Jackson Township	12/31/2021
Manasquan	12/31/2021
Montgomery Township	12/31/2021
Plumsted Township	12/31/2021
Red Bank	12/31/2021
Shrewsbury Township	12/31/2021
Western Monmouth Utilities Authority	12/31/2022
Keyport	12/31/2022
Asbury Park City	12/31/2022
Seaside Heights BOE	12/31/2022
Harvey Cedars	12/31/2022
Spring Lake	12/31/2023
Lakewood Township	12/31/2023
Manchester Township	12/31/2023
Allentown	12/31/2023
Atlantic Highlands Borough	12/31/2023
Brielle Borough	12/31/2023
Highland Elementary School	12/31/2023
Matawan	12/31/2023
Toms River MUA	12/31/2023
West Long Branch	12/31/2023
Bedminster Township	12/31/2023
Tuckerton Borough School District	12/31/2023
Barnegat Light	12/31/2023
Plumsted MUA	5/31/2024
Manasquan River Regional Sewerage Authority	12/31/2024

Central Jersey Health Insurance Fund Program Manager's Report

October 2021

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

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

ELIGIBILTY/ENROLLMENT:

Please direct any eligibility, enrollment, or system related questions to our dedicated CJHIF enrollment team. To contact the team, email cihifenrollments@permainc.com or fax to 856-552-2175.

MONTHLY BILLING

As a reminder, please be sure to check your monthly invoice for accuracy. *Please confirm the invoice detail, as retro adjustments are limited to two months by Fund policy.* If you find a discrepancy, please report it to the CJHIF eligibility/enrollment team cjhifenrollments@permainc.com or by fax at 856-552-2175.

BROKER CONTACT INFORMATION

Please direct any escalated claims, benefit coverages, prescription coverage, Medicare Advantage or appeal related questions to our dedicated CJHIF Client Servicing Team. To contact the team email: brokerservices@permainc.com.

COVID-19 UPDATES

COVID Resources

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

Operations Updates

Online Enrollment system Update – Security Enhancement

To ensure we are providing the best possible data security, The Fund's online enrollment system, Benefit Express, is updating to a multifactor authentication log in process. This means all system users will be required to provide a second form of logon authentication when logging on to the system. This will process will enhance current security and help protect again common cyber-crimes. This is a common way to enhance security and most users likely have to do the same type of process when logging on to view their banking information, email or other secure accounts.

The below message with instructions on the new authentication process was sent to all Benefit Express system users

Next Steps

Apply the security update on Friday, October 29, 2021.

When logging in for the first time, user passwords will be reset to the default. Your **Default Password** is your **birth date** entered in the format: **MMDDYYYY**.

Example: if your birth date is **June 8, 1965**, then your password would be **06081965** (no dashes or slashes). *Please note that passwords are case sensitive.*

After users update their password, users are prompted to need to provide a second form of log on authentication such as an email address or cell phone number that will be sent a code each time you access the site. *Instructions on how to provide your second form of authentication is attached.*

If you have any questions or issues logging on, please contact the PERMA enrollment team.

Open Enrollment

As a reminder, annual open enrollment is currently underway through Friday October 29th. We ask any and all updates be entered into the Benefit Express System by Friday November 5th.

Aetna Update

Jefferson Health

The Aetna contract with Jefferson Health extended through December 1, 2021. Aetna is involved in active negotiations with Jefferson and working toward an agreement. We are following this very closely with our Aetna team and are going to provide updates as they become available. To date, negotiations are very amicable and a settlement agreement expected soon.

EXPRESS SCRIPTS UPDATE

National Preferred Formulary Update (NPF) - ESI announced their NPF update for January 1, 2022. 32 additional products will be added to the exclusion list (included with your agenda). There are 58 CJHIF members identified as having filled scripts for one or more of these products in the past year. Impacted members will receive notification from ESI that includes therapeutically equivalent alternatives and are encouraged to discuss them with their physician.

Annual Notices of Credible Coverage

The Fund is working with Express Scripts to generate and mail annual NOCC letters for 2022. As you may recall, these are annual notices required by Medicare to be sent to all plan participants who are age 65 and older, or members who will be reaching age 65 in 2022. The notices were mailed on or before September 15th. A sample of this year's NOCC is included with your agenda.

ADMINISTRATIVE AUTHORIZATIONS

There is one appeal which needs to be addressed in Executive Session.

CENTRAL JERSEY HEALTH INSURANCE FUND BILLS LIST

Resolution No. 35-21 OCTOBER 2021

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

BE IT RESOLVED that the Central Jersey Health Insurance Fund's Executive Board, hereby authorizes the Fund treasurer to issue warrants in payment of the following claims; and

FURTHER, that this authorization shall be made a permanent part of the records of the Fund.

ELINID VEAD 2021

FUND YEAR 2021 Check Number	<u>Vendor Name</u>	Comment	Invoice Amount
001872 001872	AETNA HEALTH MANAGEMENT LLC	VOID	0.00 0.00
001873 001873	Flagship Health System	MONTGOMERY 10/21	117.19 117.19
001874 001874	DELTACARE USA	BE004618525 10/21	1,892.16 1,892.16
001875 001875 001875	AETNA LIFE INSURANCE COMPANY AETNA LIFE INSURANCE COMPANY	VOID VOID	0.00 0.00 0.00
001876 001876 001876	AMERIHEALTH ADMINISTRATORS AMERIHEALTH ADMINISTRATORS	VOID VOID	0.00 0.00
001877 001877 001877	PA YFLEX PA YFLEX	OCEAN PORT 10/21 MRRSA 9/21	0.00 108.00 15.00
001878 001878	DELTA DENTAL OF NEW JERSEY INC	VOID	0.00 0.00
001879 001879 001879	PERMA RISK MANAGEMENT SERVICES PERMA RISK MANAGEMENT SERVICES	POSTAGE - MAY, JUNE, AUG. & SEPT. 2021 ADMINISTRATION FEES 10/21	159.50 33,926.30
001880 001880	BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEE 10/21	34,085.80 3,036.00
001881 001881	STEPHEN MA YER	TREASURER FEE 10/21	3,036.00 1,020.00
001882 001882	ASBURY PARK PRESS	ACCT: ASB-187377 - NOTICE - 9.14.21	1,020.00 65.60
001883 001883	MEDICAL EVALUATION SPECIALISTS	MES CASE #1451070	225.00
7001884 7001884	TROPHY KING	EXECUTIVE COMMITTEE MEMBER GIFT 9/21	225.00 103.43 103.43

		Treasurer	
	I hereby certify the availability of sufficient unencum	Dated:bered funds in the proper accounts to fully pay the above claims	i.
	Attest:		
	Chairperson		
		TOTAL PAYMENTS ALL FUND YEARS	561,207.40
		Total Payments FY 2021	561,207.40
0010/3	WEST ON ESSENCE COM	of Left le Resident Net - 1 AMIET 10/21	83,810.57
001893 001893	WESTPORT INSURANCE CORP WESTPORT INSURANCE CORP	SPECIFIC REINSURANCE - SINGLE 10/21 SPECIFIC REINSURANCE - FAMILY 10/21	12,615.00 67,082.57
001893 001893	WESTPORT INSURANCE CORP	A GGREGATE REINSURANCE 10/21	4,113.00
001892	DELTA DENTAL OF NEW JERSEY INC	DENTAL TPA 10/21	6,502.08 6,502.08
001892			1,100.25
001891 001891	AMERIHEALTH ADMINISTRATORS AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 10/21 WELLNESS CREDIT 10/21	1,134.00 -33.75
001891	A MEDILIEA I TH A DMINISTRA TORS	MEDICAL TRA 10/21	,
001890	AETNA LIFE INSURANCE COMPANY	VISION TPA 10/21	124.67 74,191.99
001890	AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 10/21	74,067.32
001890			185,153.16
001889 001889	AETNA HEALTH MANAGEMENT LLC	MEDICARE ADVANTAGE 10/21	185,153.16
001888	WESTPORT INSURANCE CORP	VOID	0.00 0.00
001888	WESTPORT INSURANCE CORP	VOID	0.00
001888 001888	WESTPORT INSURANCE CORP	VOID	63,722.50 0.00
001887 001887	MUNICIPAL REINSURANCE H.I.F.	REINSURANCE 10/21	63,722.50
001886	ACCESS	ACCT #420 - ARC. AND STOR 8.31.21	64.81 129.62
001886 001886	ACCESS	ACCT #420 - ARC. AND STOR 9.30.21	64.81
001885	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 10/21	1,422.69 105,929.05
001885	CONNER STRONG & BUCKELEW	FUND COORDINATOR 10/21	5,214.34
001885 001885	CONNER STRONG & BUCKELEW CONNER STRONG & BUCKELEW	PROGRAM MANAGER FEES 10/21 DENTAL COMMISSION 10/21	60,135.34 582.08
001885	CONNER STRONG & BUCKELEW	NEW MEMBER COMMISSION 10/21	37,324.60
001885 001885	CONNER STRONG & BUCKELEW	PLAN DOCUMENTS 10/21	1,250.00

CENTRAL JERSEY HEALTH INSURANCE FUND DIVIDEND BILLS LIST

Confirmation of Payment OCTOBER 2021

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

BE IT RESOLVED that the Central Jersey Health Insurance Fund's Executive Board, hereby authorizes the Fund treasurer to issue warrants in payment of the following claims; and

FURTHER, that this authorization shall be made a permanent part of the records of the Fund.

FUND YEAR CLOSES Check Number	<u>Vendor Name</u>	Comment	Invoice Amount
001894 001894	RED BANK BOROUGH	DIVIDEND - OCTOBER 2021	612,276.49
001895 001895	BOROUGH OF BARNEGAT LIGHT	DIVIDEND - OCTOBER 2021	612,276.49 635.28 635.28
001896 001896	INTERLAKEN BOROUGH	DIVIDEND - OCTOBER 2021	3,093.39 3,093.39
001897 001897	ALLENTOWN BOROUGH	DIVIDEND - OCTOBER 2021	23,904.00 23,904.00
001898 001898	BRICK TOWNSHIP	DIVIDEND - OCTOBER 2021	644,378.21 644,378.21
001899 001899	SPRING LAKE BOROUGH	DIVIDEND - OCTOBER 2021	8,390.60 8,390.60
001900 001900	KEYPORT BOROUGH	DIVIDEND - OCTOBER 2021	5,813.39 5,813.39
001901 001901	SOUTH RIVER BOROUGH	DIVIDEND - OCTOBER 2021	397,359.82 397,359.82
001903 001903	ENGLISHTOWN BOROUGH	DIVIDEND - OCTOBER 2021	3,504.08 3,504.08
		Total Payments FY CLOSED	1,699,355.26
FUND YEAR 2020 Check Number	Vendor Name	Comment	Invoice Amount
001902 001902	TRUST ACCOUNT OF COHEN HOWARD, LLP	SETTLEMENT PA YMENT 2020 (FROM OCT. 2021)	100,000.00 100,000.00
		Total Payments FY 2020	100,000.00
		TOTAL PAYMENTS ALL FUND YEARS	1,799,355.26
	Chairperson		
	Attest:		
Ιh	ereby certify the availability of sufficient unencumbered fun	Dated:	s.
111	17		

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	Treasurer

Central Jersey Health Insurance Fund

			SUMMARY O	CASH TRANSAC	CTIONS - ALL FUN	ND YEARS COMB	INED			
Current Fund Year: 20 Month Ending: A										
	Med	Dental	Rx	Vision	Medicare Advantage	Reinsurance	DMO Premiums	Future	Admin	TOTAL
OPEN BALANCE	7,685,601.55	847,241.73	5,190,121.38	77,290.64	8,117,007.48	(113,452.45)	19,834.97		106,077.40	21,929,722.70
RECEIPTS										
Assessments	1,423,946.33	89,075.84	436,031.20	1,329.60	109,140.50	92,080.25	1,921.13		149,434.16	2,302,959.01
Refunds										
Invest Pymnts	243.30	19.49	132.01	1.63	179.79		0.09		1.07	577.38
Invest Adj				<u>_</u>						
Subtotal Invest	243.30	19.49	132.01	1.63	179.79		0.09		1.07	577.38
Other *	476,838.24		78,929.79						5,000.00	560,768.03
TOTAL	1,901,027.87	89,095.33	515,093.00	1,331.23	109,320.29	92,080.25	1,921.22		154,435.23	2,864,304.42
EXPENSES										
Claims Transfers	2,144,358.69	113,923.67	871,756.57							3,130,038.93
Expenses					180,754.00	147,864.06			236,463.81	565,081.87
Other *										
TOTAL	2,144,358.69	113,923.67	871,756.57		180,754.00	147,864.06			236,463.81	3,695,120.80
END BALANCE	7,442,270.73	822,413.39	4,833,457.81	78,621.87	8,045,573.77	(169,236.26)	21,756.19		24,048.82	21,098,906.32

SUMMARY OF CASH AND INVEST	MENT INSTRUMENTS					
Central Jersey Health Insurance Fund						
ALL FUND YEARS COMBINED						
CURRENT MONTH	August					
CURRENT FUND YEAR	2021					
	Description: Instru		Instr#3	Instr#4	Instr#5	Instr#6
	ID Number:	N.J.C.M.F.	Bank of NY	TD Bank	Investments	Ocean First Admin
	Maturity (Yrs)			Admin		
	Purchase Yield:		Old			
	TOTAL for All					
	Accts & instruments					
Opening Cash & Investment Balance	\$21,929,722.47	\$3,656,146.82			\$8,992,502.27	\$9,281,073.38
Opening Interest Accrual Balance	\$3,152.33				\$3,152.33	
1 Interest Accrued and/or Interest Cost	\$328.63				\$328.63	
2 Interest Accrued - discounted Instr.s						
3 (Amortization and/or Interest Cost)						
4 Accretion						
5 Interest Paid - Cash Instr.s	\$1,484.87	\$127.67			(\$911.74)	\$2,268.94
6 Interest Paid - Term Instr.s	\$1,406.25				\$1,406.25	
7 Realized Gain (Loss)	-\$2,313.75				(\$2,313.75)	
8 Net Investment Income	-\$500.25	\$127.67			(\$2,896.86)	\$2,268.94
9 Deposits - Purchases	\$2,863,727.03					\$2,863,727.03
# (Withdrawals - Sales)	-\$3,695,120.80					(\$3,695,120.80)
Ending Cash & Investment Balance	\$21,098,906.07	\$3,656,274.49			\$8,990,683.03	\$8,451,948.55
Ending Interest Accrual Balance	\$2,074.71				\$2,074.71	
Plus Outstanding Checks	\$6,671.28					\$6,671.28
(Less Deposits in Transit)						
Balance per Bank	\$21,105,577.35	\$3,656,274.49			\$8,990,683.03	\$8,458,619.83
Annualized Rate of Return This Month	-0.03%	0.04%			-0.39%	0.31%

		CERTI	FICATION AND REC	CONCILIATIO	N OF CLAIMS PA	YMENTS AND	RECOVERIES		
			C	entral Jersey I	Health Insurance F	und	1		
Month		August							
Current Fund Year		2021							
		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	August	August	August	August	Reconciled	Variance From	Month
2021	Med	8,087,084.10	1,295,474.69		9,382,558.79		9,382,558.79	8,087,084.10	1,295,474.69
	Dental	770,632.96	112,312.17		882,945.13		882,945.13	770,632.96	112,312.17
	Rx	3,926,424.14	676,109.86		4,602,534.00		4,602,534.00	3,926,424.14	676,109.86
	Vision								
	Total	12,784,141.20	2,083,896.72		14,868,037.92		14,868,037.92	12,784,141.20	2,083,896.72



CENTRAL JERSEY HEALTH INSURANCE FUND

Monthly Claim Activity Report

October 20, 2021



CENTRAL JERSEY HEALTH INSURANCE FUND

	MEDICAL CLAIMS				MEDICAL CLAIMS			
	PAID 2020	# OF EES	P	ER EE	PAID 2021	# OF EES	P	ER EE
JANUARY	\$1,267,894	1,613	\$	786	\$2,525,722	1,600	\$	1,579
FEBRUARY	\$1,760,412	1,591	\$	1,106	\$1,782,274	1,595	\$	1,117
MARCH	\$2,343,550	1,590	\$	1,474	\$2,242,793	1,600	\$	1,402
APRIL	\$1,158,223	1,593	\$	727	\$1,950,954	1,603	\$	1,217
MAY	\$1,324,407	1592	\$	831	\$2,074,353	1598	\$	1,298
JUNE	\$1,635,452	1,577	\$	1,037	\$2,464,841	1,595	\$	1,545
JULY	\$1,854,432	1,573	\$	1,179	\$1,842,582	1,573	\$	1,171
AUGUST	\$1,548,802	1,569	\$	987	\$2,337,237	1,564	\$	1,494
SEPTEMBER	\$3,018,089	1,560	\$	1,935				
OCTOBER	\$1,819,060	1,562	\$	1,165				
NOVEMBER	\$2,410,256	1,569	\$	1,536				
DECEMBER	\$2,658,424	1,571	\$	1,692				
TOTALS	\$22,799,000				\$17,220,756			
					2021 Average	1,591	\$	1,353
					2020 Average	1,580	\$	1,205

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

Paid Dates: Plan Sponsor Unique ID: All 08/01/2021 - 08/31/2021 CENTRAL JERSEY HEALTH INSURANCE FUND 01/01/2011 - 08/31/2021 Customer: Service Dates:

Group / Control: 00143735, 00285786, 00659552, 00737415, 00866354, SI362223Line of Business:

> **Billed Amt** Paid Amt

> > \$204,089.11 \$318,707.80

> > > \$980.00 \$171,507.48

Total: \$319,687.80 \$375,596.59



Central Jersey Health Insurance Fund

9/1/2020 through 8/31/2021 (Unless otherwise noted)



Performance: Metrics thru Aug 2021

Customer Service Performance

95.3%

3.8%

91.7 sec

Medical Claims Paid Per Member: January 2021- August 2021

Total Medical Paid per EE: \$1,353

Network Discounts

Inpatient: 62.1%
Ambulatory: 65.0%
Physician/Other: 64.1%
TOTAL: 63.9%

Provider Network

% Admissions In-Network: 97.5% % Physician Office: 89.0%

Aetna Book of Business:

Admissions 98.1%; Physician 90.9%

Top Facilities Utilized (by total Medical Spend)

- Jersey Shore Medical
- · Monmouth Medical Center
- · Community Medical Center
- RWJUH New Brunswick
- Riverview Medical Center

Catastrophic Claim Impact (January 2021 – August 2021)

Number of Claims Over \$50,000: 36
Claimants per 1000 members: 9.2
Avg. Paid per Claimant: \$111,875
Percent of Total Paid: 25.4%

 Aetna BOB- HCC account for an average of 41.8% of total Medical Cost

Nurse Case Member Outreach: YTD 2021

Unique Members Identified: 62
Outreach Opportunities Identified: 63

Outreach in Progress: 3 Completed Outreach: 50

Newly Engaged cases: 14 Unable to Reach: 36 Member Declined: 0

Teladoc Activity: Jan 2021-August 2021

Total Registrations: 70 Total Online Visits: 156

Total Net Claims Savings: \$23,178

New

Total Visits w/ Rx: 114
Mental Health Visits: 14
Dermatology Visits: 4

Claims Performance

Allentown Service Center

1st Call Resolution:

Abandonment Rate:

Avg. Speed of Answer:

Financial Accuracy: 97.9% 90% processed w/in: 5.2 days 95% processed w/in: 8.7 days

Performance Goals

1st Call Resolution: 90%
Abandonment Rate less than: 2.5%
Average Speed of Answer: 30 sec

Financial Accuracy: 99%

Turnaround Time

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

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	AmeriHea	<u>lth</u> . ∘ ⊼ :							
	2020 Cent	tral HIF					2021 Central HIF		
	MEDICAL CLAIMS PAID 2020	TOTAL	# OF EES	PER EE		MEDICAL CLAIMS PAID 2021	TOTAL	# OF EES	PER EE
JANUARY	\$10,516.00	\$10,516.00	19	\$553.47	JANUARY	\$14,028.00	\$14,028.00	23	\$609.91
FEBRUARY	\$10,869.00	\$10,869.00	19	\$572.05	FEBRUARY	\$9,664.00	\$9,664.00	23	\$420.17
MARCH	\$26,204.71	\$26,204.71	19	\$1,379.19	MARCH	\$17,132.08	\$17,132.08	23	\$744.87
APRIL	\$15,189.60	\$15,189.60	19	\$799.45	APRIL	\$16,600.48	\$16,600.48	23	\$721.76
MAY	\$7,611.95	\$7,611.95	19	\$400.63	MAY	\$17,013.00	\$17,013.00	23	\$739.69
JUNE	\$47,480.76	\$47,480.76	19	\$2,498.97	JUNE	\$10,937.00	\$10,937.00	23	\$475.52
JULY	\$24,806.65	\$24,806.65	20	\$1,240.33	JULY	\$20,295.62	\$20,295.62	23	\$882.41
AUGUST	\$20,738.50	\$20,738.50	20	\$1,036.92	AUGUST	\$16,469	\$16,469	24	\$686.20
SEPTEMBER	\$24,811.89	\$24,811.89	20	\$1,240.59	SEPTEMBER	\$19,682	\$19,682	25	\$787.28
OCTOBER	\$19,372.83	\$19,372.83	21	\$922.51	OCTOBER				
NOVEMBER	\$43,247.91	\$43,247.91	21	\$2,059.42	NOVEMBER				
DECEMBER	\$17,966.15	\$17,966.15	22	\$855.53	DECEMBER				
TOTALS	\$268,815.95	\$268,815.95			TOTALS	\$141,821.18			
		2020 Average	20	\$1,129.92			2021 Average	23	\$674.20



CENTRAL NEW JERSEY HEALTH INSURANCE FUND - 0002189322

Claims Incurred between 3/1/2020 and 10/12/2021 and Paid between 3/1/2020 and 10/12/2021

COVID19 Claims currently are consider to be claims with Procedure codes 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0031A, 0041A, 0042A, 0051A, 0052A, 0053A, 0054A, 0064A, 0202U, 0223U, 0224U, 0225U, 0226U, 0240U, 0241U, 86328, 86408, 86409, 86413, 86769, 87426, 87428, 87635, 87636, 87637, 87811, 91300, 91301, 91303, 91304, 91305, 91306, C9803, G2023, G2024, M0201, M0239, M0240, M0241, M0243, M0244, M0245, M0246, M0247, M0248,

AGE BAND	CLAIMANT COUNT	CLAM COUNT	NET PAY	COST PER CLAIM	COST PMPM
<1	0	0	\$0.00	\$0.00	\$0.00
1-5	2	4	\$270.13	\$67.53	\$4.09
6-18	8	20	\$2,285.86	\$114.29	\$7.75
19-25	3	9	\$1,026.65	\$114.07	\$11.80
26-39	6	14	\$1,444.09	\$103.15	\$9.89
40-64	18	62	\$11,811.73	\$190.51	\$21.75
65+	1	2	\$122.02	\$61.01	\$7.18
Unknown	0	0	\$0.00	\$0.00	\$0.00

REL TO INS	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Employee	14	48	\$6,155.39	\$128.24	\$14.15
Spouse	9	29	\$7,222.45	\$249.05	\$27.25
Dependent	14	34	\$3,582.64	\$105.37	\$7.89

GENDER	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Female	20	77	\$12,702.39	\$164.97	\$20.13
Male	17	34	\$4,258.09	\$125.24	\$8.14
Undisclosed	0	0	\$0.00	\$0.00	\$0.00

ST CD	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
NJ	37	111	\$16,960,48	\$152.80	\$14.70

Summary by Service Type - Outpatient and Professional Claims

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

SRVC TP DSC	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Emergency Room	3	5	\$7,203.83	\$1,440.77	\$6.24
Emergency Room With Observation Bed	1	1	\$0.00	\$0.00	\$0.00
Office Physician Visit	3	3	\$335.80	\$111.93	\$0.29
Pathology (Laboratory)	33	69	\$6,177.45	\$89.53	\$5.35
Telemedicine	1	1	\$30.29	\$30.29	\$0.03
Urgent Care	10	21	\$2,804.52	\$133.55	\$2.43

TOP PROVIDERS(TOP 25 BY NET PAYMENT)

PROVIDER NAME	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Southern Ocean Medical Center	9	14	\$5,275.83	\$376.84	\$4.57
Labcorp Raritan	15	24	\$2,174.84	\$90.62	\$1.88
APG Surgical Specialties Ent	7	14	\$1,947.73	\$139.12	\$1.69
Atlanticare Regional Medical Center	1	1	\$1,638.78	\$1,638.78	\$1.42
Barron Emergency Physicians	1	1	\$849.39	\$849.39	\$0.74
Bio Reference Laboratory Inc	3	4	\$670.00	\$167.50	\$0.58
GENESIS LABORATORY MANAGEMENT	1	2	\$556.50	\$278.25	\$0.48
MVP Medical Associates	2	4	\$530.00	\$132.50	\$0.46
Quest Diagnostics Inc	3	4	\$342.13	\$85.53	\$0.30
Atlantic Emergency Assoc Pa	1	1	\$324.20	\$324.20	\$0.28
TEMPUS LABS INC.	3	3	\$300.00	\$100.00	\$0.26
Urgent Care Physicians of New Jersey Llc	1	4	\$280.00	\$70.00	\$0.24
Minute Clinic Diagnostic of New Jersey LLC	8	14	\$244.01	\$17.43	\$0.21
Pediatric Affiliates PA	3	5	\$204.80	\$40.96	\$0.18
Accu Reference Medical Lab	1	1	\$200.00	\$200.00	\$0.17
THERANOSTIX INC	1	1	\$200.00	\$200.00	\$0.17
City Medical of New Jersey PC	1	1	\$180.00	\$180.00	\$0.16
SUMMIT MEDICAL GROUP PA	1	1	\$180.00	\$180.00	\$0.16
CLARITY LABORATORIES LLC	1	1	\$150.00	\$150.00	\$0.13
COMMUNITY MEDICAL CENTER	1	1	\$139.62	\$139.62	\$0.12
ACUTIS DIAGNOSTICS INC	1	1	\$125.00	\$125.00	\$0.11
Cooper University Hospital	1	1	\$120.12	\$120.12	\$0.10
ATLANTICARE CLINICAL LABORATOR	1	1	\$109.00	\$109.00	\$0.09
Robert Wood Johnson Univ Hosp	1	1	\$58.44	\$58.44	\$0.05
Cedar Bridge Pediatrics	1	1	\$52.88	\$52.88	\$0.05

COVID19 Vaccine Claims with Procedure codes 0001A, 0002A, 0003A, 0011A, 0012A, 0013A, 0031A, 91300, 91301, 91303

AGE BAND	Single Dose Vaccines CLAIMANT COUNT	1st Dose Vaccine CLAIMANT COUNT	2nd Dose Vaccine CLAIMANT COUNT	NET PAY	COST PER CLAIMANT
<1	0	0	0	\$0.00	
1-5	0	0	0	\$0.00	
6-18	0	0	0	\$0.00	
19-25	0	0	0	\$0.00	
26-39	0	1	0	\$51.87	\$51.87
40-64	0	5	0	\$170.69	\$34.14
65+	0	0	0	\$0.00	
Unknown	0	0	0	\$0.00	

COVID19 Claims for Urgent Care and Retail Clinics Only

Urgent Care

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIMANT
<1	0	0	\$0.00	\$0.00
1-5	0	0	\$0.00	\$0.00
6-18	2	3	\$500.00	\$250.00
19-25	1	4	\$584.52	\$584.52
26-39	1	1	\$315.00	\$315.00
40-64	6	12	\$1,370.73	\$228.46
65+	1	1	\$34.27	\$34.27
Unknown	0	0	\$0.00	\$0.00

Retail Clinic

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



Central Jersey Health Insurance Fund

Total Component/Date of Service (Month)	202001	202002	202003	2020Q1	202004	202005	202006	2020Q2	202007	202008	202009	2020Q3	202010	202011	20212	202Q4	2020YTD
Membership	3,185	3,175	3,175	3,178	3,190	3,173	3,173	3,179	3,171	3,166	3,150	3,162	3,151	3,146	3,160	3,152	3,168
Total Days	134,092	121,687	143,315	399,094	125,054	117,060	122,211	364,325	122,058	117,585	119,916	359,559	121,769	115,114	124,768	361,651	1,484,629
Total Patients	1,329	1,266	1,284	1,975	1,080	1,019	1,104	1,644	1,100	1,078	1,116	1,727	1,120	1,082	1,105	1,715	2,486
Total Plan Cost	\$538,858	\$593,799	\$613,812	\$1,746,469	\$510,765	\$581,440	\$531,348	\$1,623,553	\$571,356	\$645,724	\$501,656	\$1,718,736	\$527,918	\$610,958	\$548,684	\$1,687,560	\$6,776,318
Generic Fill Rate (GFR) - Total	83.3%	82.6%	81.4%	82.4%	82.1%	80.6%	81.7%	81.5%	82.7%	81.1%	82.8%	82.2%	81.4%	81.4%	82.7%	81.8%	82.0%
Plan Cost PMPM	\$169.19	\$187.02	\$193.33	\$183.16	\$160.11	\$183.25	\$167.46	\$170.26	\$180.18	\$203.96	\$159.26	\$181.17	\$167.54	\$194.20	\$173.63	\$178.45	\$178.25
Total Specialty Plan Cost	\$153,988	\$160,142	\$179,998	\$494,129	\$136,915	\$193,021	\$174,930	\$504,867	\$184,804	\$263,653	\$110,907	\$559,363	\$137,706	\$241,856	\$197,055	\$576,616	\$2,134,975
Specialty % of Total Specialty Plan Cost	28.6%	27.0%	29.3%	28.3%	26.8%	33.2%	32.9%	31.1%	32.3%	40.8%	22.1%	32.5%	26.1%	39.6%	35.9%	34.2%	31.5%

Total Component/Date of Service (Month)	202101	202102	202103	2021Q1	202104	202105	202106	2021Q2	202107	202108	202109	2021Q3	202110	202111	202112	2021Q4	2021YTD
Membership	3,126	3,118	3,129	3,124	3,133	3,130	3,120	3,128	3,127	3,071	3,091	3,096					3,116
Total Days	118,409	109,551	127,830	355,790	120,112	135,385	117,482	372,979	111,788	123,972	120,605	356,365					1,085,134
Total Patients	1,072	999	1,128	1,669	1,090	1,175	1,118	1,713	1,119	1,124	1,112	1,731					2,223
Total Plan Cost	\$493,344	\$604,723	\$621,446	\$1,719,513	\$580,452	\$695,621	\$557,018	\$1,833,091	\$534,820	\$635,802	\$598,315	\$1,768,936					5,321,540
Generic Fill Rate (GFR) - Total	84.9%	84.2%	82.9%	84.0%	84.2%	85.3%	84.2%	84.6%	85.6%	85.1%	85.2%	85.3%					84.6%
Plan Cost PMPM	\$157.82	\$193.95	\$198.61	\$183.45	\$185.27	\$222.24	\$178.53	\$195.36	\$171.03	\$207.03	\$193.57	\$190.43					189.75
% Change Plan Cost PMPM	-7.9%	2.2%	1.1%	-1.3%	14.2%	19.7%	5.4%	13.3%	-5.9%	1.2%	21.4%	4.6%					5.2%
Total Specialty Plan Cost	\$175,727	\$261,778	\$233,397	\$670,901	\$219,212	\$315,183	\$218,503	\$752,897	\$188,162	\$256,403	\$253,356	\$697,921					\$2,121,719
Specialty % of Total Specialty Plan Cost	35.6%	43.3%	37.6%	39.0%	37.8%	45.3%	39.2%	41.1%	35.2%	40.3%	42.3%	39.5%					39.9%

	<u>PMPM</u>
Jan-Sept 2020	\$178.19
Jan-Sept 2021	\$189.75
Trend - 2021 YTD	6.5%

CENTRAL JERSEY HEALTH INSURANCE FUND CONSENT AGENDA OCTOBER 20, 2021

The following Resolutions listed on the Consent Agenda will be enacted in one motion. Copies of all Resolutions are available to any person upon request. Any Commissioner wishing to remove any Resolution(s) to be voted upon, may do so at this time, and said Resolution(s) will be moved and voted separately.

Resolutions

Subject Matter

Motion	Second	
Resolution 31-21: 2022 Budg	get Adoption	Page 35
•	Approval	_
Resolution 33-21: EUS Servi	ice Contract Award	Page 38
	021 Bills and Dividends	0

RESOLUTION NO. 31-21

CENTRAL JERSEY HEALTH INSURANCE FUND ADOPTION OF THE 2022 INTRODUCED BUDGET

WHEREAS, The Central Jersey Health Insurance Fund is required under State regulation to adopt an annual budget in accordance with the bylaws of the Fund; and

WHEREAS, the Executive Committee met on September 8, 2021 in Public Session to introduce the proposed budget and for the 2022 Fund Year; and

WHEREAS, the Executive Committee met on October 20, 2021 in Public Session to adopt the proposed budget and for the 2022 Fund Year; and

WHEREAS, that a public hearing to adopt the 2022 budget was held on October 20, 2021 at 1:30 pm.

NOW THEREFORE BE IT RESOLVED that the Executive Committee of the Central Jersey Health Insurance Fund hereby adopt the 2022 budget in the amount of \$44,077,584

BE IT FURTHER RESOLVED that copies of this resolution shall be sent to each Commissioner, Risk Manager, and Governing Body, the New Jersey Department of Banking and Insurance, and the New Jersey Department of Community Affairs.

BY:_____CHAIRPERSON
ATTEST:

ADOPTED: OCTOBER 20, 2021

SECRETARY

RESOLUTION NO. 32-21

RESOLUTION AUTHORIZING REFUND FROM CLOSED YEARS ACCOUNT

WHEREAS, N.J.A.C. 11:15-2.21 provides that a FUND may seek approval from the Commissioner of Insurance for a refund of excess monies from any FUND year upon compliance with certain requirements; and

WHEREAS, the FUND has obtained a calculation from its Actuary and Executive Director as to the amount of money which is available for distribution consistent with the aforementioned regulations, and the financial integrity of the FUND; and

WHEREAS, the Fund Commissioners have determined that it would be in the best interest of the FUND and its member municipalities and school boards to make certain refunds to be used towards the Fund Year 2022 Budget;

NOW, THEREFORE, BE IT RESOLVED by the Fund Commissioners of the Central Jersey Regional Employee Benefits Fund, as follows:

- 1. The Fund Commissioners have balanced the interests of the member municipalities/school boards in obtaining the benefit of such monies as are available for refund against the need for the FUND to protect and preserve its financial integrity.
- 2. As of August 31, 2021 all years combined, the Fund has a surplus balance of \$19,435,411. Of that, the Fund Commissioners declare a dividend of \$4,247,756 to members included in the Fund at that time.
- 3. The members have an option to take the dividend as a check, invoice credit or retain with the Fund for future distribution.
- 3. The Executive Director is, therefore, authorized and directed to submit such documents as the regulations require to the Department of Insurance and the Department of Community Affairs.
- 4. The FUND Treasurer is authorized to prepare and execute checks for the pro-rated amount of the aforementioned refunds due to each former member municipality and school board for the year in question, provided, however, the FUND Treasurer shall deduct any outstanding assessment receivable balances without regard for Fund year, upon receipt of written documentation of approval or acquiescence of these refunds from the Department of Insurance and the Department of Community Affairs. Said refunds shall be made to the municipalities/school boards which were members of the FUND for the years in question in the same ratio as said municipalities/school boards were assessed for the years in question.

NOW, THEREFORE, BE IT RESOLVED, that the Executive Committee hereby states that they have complied with N.J.A.C. 11:15-2.21 and does hereby submit a certified copy of this resolution to said Board to show evidence of said compliance.

BY:	
Chairperson	
ATTEST:	
Secretary	

ADOPTED: October 20, 2021

RESOLUTION NO. 33-21

CENTRAL JERSEY HEALTH INSURANCE FUND RESOLUTION AWARD OF CONTRACT EXTRAORDINARY, UNSPECIFIABLE SERVICES

WHEREAS, the Central Jersey Regional Employee Benefits Fund (hereinafter "the Fund") is duly constituted as an insurance Fund and is subject to certain requirements of the Local Public Contracts Law; and;

WHEREAS, the Executive Committee of the Fund has deemed it necessary and appropriate to obtain certain extraordinary and unspecifiable services; and

WHEREAS, the Executive Committee resolves to award a contract for certain Fund services in accordance with N.J.S.A 40A:11-5(l)(m), and has received a certification from the Administrator for the Fund on the nature of such services and the due diligence efforts that were made to obtain quotes for the coverages described herein;

NOW, THEREFORE, BE IT RESOLVED that the following insurance contracts be awarded for the periods of January 1, 2022 through December 31, 2022:

- Medical Third Party Administrator Aetna (\$40.54 PEPM \$762.307 Annual)
- Medical Third Party Administrator AmeriHealth (\$38.94 PEPM \$10,403 Annual)
- Dental Third Party Administrator Delta Dental (\$3.12 PEPM \$78,250 Annual)
- Medicare Advantage and Employer Group Waiver Program Provider Aetna
- Medicare Advantage and Employer Group Waiver Program Provider United Healthcare

BE IT FURTHER RESOLVED that contracts providing the specified services will be on file in the Fund's office, located at 9 Campus Drive – Suite 216, Parsippany, NJ 07054; and

BE IT FURTHER RESOLVED that notice of this action shall be advertised in the Fund's official newspapers in accordance with law and notice of this action along with completed contracts shall be filed with the New Jersey Department of Banking and Insurance, the New Jersey Department of Community Affairs, and the New Jersey Office of the Comptroller.

BY:		
CHAIR		
ATTEST:		
SECRETARY	 	

ADOPTED: October 20, 2021

STANDARD CERTIFICATION DECLARATION FOR AN EXTRAORDINARY UNSPECIFIABLE SERVICE

TO: Members of the CENTRAL JERSEY HEALTH INSURANCE FUND

FROM: Paul Laracy, PERMA Risk Management Services

DATE: October 20, 2021

SUBJECT: This is a contract for selection of a Medicare Advantage and Employer Group Waiver Program Provider

This is to request your approval of a resolution authorizing a contract to be executed as follows:

Firms: Aetna Medicare Advantage, Aetna, Amerihealth, Delta Dental, United Healthcare
Cost: Not to exceed the budgeted amount based on the exposure as of the date the budget was

prepare/adopted

Duration: One Year (N.J.S.A. 40A:11-15(1)(6))

Purpose: Provide Medical and Prescription Medicare provider services for the CENTRAL JERSEY

HEALTH INSURANCE FUND

This is to request an award of a contract without the receipt of formal bids as an Extraordinary Unspecifiable Service [N.J.S.A. 18A:18A-5(a)(ii) and N.J.A.C. 5:34-2.3(b)]. I do hereby certify to the following:

1. Provide a clear description of the nature of the work to be done.

For Aetna, Amerihealth and Delta Dental:

The contractor will provide the day to day claims adjudication and management in accordance to member plan documents and Fund rules and regulations. This vendor was selected based upon cost and other factors, including but not limited to, the ability to provide coverage levels that meets or exceeds the current health care coverage.

For Medicare Advantage for Aetna and United Healthcare

The contractor will provide the day to day claims adjudication and management between the plan documents and Medicare rules. The coverage will be fully insured through Aetna where a premium is paid by the Fund for the service. This vendor was selected based upon cost and other factors, including but not limited to, the ability to provide coverage levels that meets or exceeds the current health care coverage.

2. Describe in detail why the contract meets the provisions of the statute and rules:

N.J.S.A. 40A:11-5(1)(m).

3. The service(s) is of such a specialized and qualitative nature that the performance of the service(s) cannot be reasonably described by written specifications because:

Not applicable.

4. Describe the informal solicitation of quotations:

The Contracts Committee reviewed the current contracts and through the guidance of the Fund Administrator and Program Manager, the Committee determined that the Fund's best option would be to negotiate a new one-year contract in lieu of an RFP process.

5.	I have reviewed the rules of the Division of Local Government Services pursuant to N.J.A.C. 5:34-2.1 et seq. and certify that the proposed contract may be considered an extraordinary unspecifiable service in accordance with the requirements thereof.						
	Respectfully,						
	Name(Signature)						
	Title						

RESOLUTION NO. 34-21

CENTRAL JERSEY HEALTH INSURANCE FUND APPROVAL OF THE OCTOBER 2021 BILLS LIST and DIVIDEND BILLS LIST

WHEREAS, the Central Jersey Health Insurance Fund held a Public Meeting on October 20, 2021 for the purposes of conducting the official business of the Fund; and

WHEREAS, The Treasurer for the Fund presented bills lists to satisfy outstanding costs incurred for operating the Fund during the months of October 2021 for consideration and approval of the Executive Committee; and

WHEREAS, The Treasurer for the Fund presented a Treasurers Report which detailed the claims payments and imprest transfers for the Fund for the Month of August for all Fund Years 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 Central Jersey Health Insurance Fund hereby approve the Bills List for October 2021 and Dividend Bills List 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 Central Jersey Health Insurance 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.

		-,	
BY:			
	IRPERSON	J	
ATTEST:			
SECI	RETARY		

ADOPTED: OCTOBER 20, 2021

APPENDIX I

CENTRAL JERSEY HEALTH INSURANCE FUND OPEN MINUTES September 8, 2021 ZOOM MEETING 1:30 PM

Meeting called to order by Chairman Thomas Nolan. The Open Public Meeting notice read into record.

PLEDGE OF ALLEGIANCE MEETING OF EXECUTIVE COMMITTEE CALLED TO ORDER ROLL CALL OF 2021 EXECUTIVE COMMITTEE

CHAIRPERSON		
Thomas Nolan	Borough of Brielle	Present
SECRETARY		
William Rieker	Township of Lakewood	Present
EXECUTIVE	COMMITTEE	
Diane Lapp	Township of Manchester	Absent
Adam Hubeny	Borough of Atlantic Highlands	Absent
Donato Nieman	Township of Montgomery	Absent
Brian Valentino	Western Monmouth MUA	Present
Brian Brach	Manasquan RRSA	Present
ALTERNATES:		
Brian Dempsey	Spring Lake Borough	Present

APPOINTED OFFICIALS PRESENT:

Executive	PERMA Risk Management	Paul Laracy	Present
Director/Administrator	Services	Emily Koval	Present
		Jordyn DeLorenzo	Present
Program Manager	Conner Strong & Buckelew	Brandon Lodics	Present
_	_	Jozsef Pfeiffer	Present
Attorney	Berry, Sahradnik, Kotzas &	Jack Sahradnik	Present
	Benson		
Treasurer		Stephen Mayer	Present
Network & Medical Claims	Aetna	Jason Silverstein	Present
Service			
Network & Medical Claims	AmeriHealth	Kristina Strain	Present
Service			
Dental Claims Service	Delta Dental	Brian Remlinger	Present
Rx Administrator	Express Scripts	Chris Auberger	Absent
Auditor	Mercadien	Digesh Patel	Absent

OTHERS PRESENT:

John Lajewski

Chris Mullins

Beata

Eric Sorchik

Ashley Stoffel

Angela Morin

Tom Fletcher

Ken Duffy

Tami Novak

Zimmer

Anthony Tonzini

Danskin Agency

Alison Kelly

Sam DeMarini

Louis Moeller

Sam DiMarini

APPROVAL OF MINUTES: JULY 21, 2021 OPEN:

MOTION TO APPROVE OPEN MINUTES OF JULY 21, 2021

MOTION: Commissioner Valentino SECOND: Commissioner Brach

VOTE: Unanimous

CORRESPONDENCE: None

EXECUTIVE DIRECTOR'S REPORT

FINANCIAL FAST TRACK as of July 31, 2021 – Executive Director Koval said YTD our claims budget is running about 8% below which is a good thing. She said the statutory surplus is currently \$22 million.

2022 BUDGET INTRODUCTION

Following is the proposed 2022 budget reflecting an average assessment decrease of .56%.

CLAIMS FUND

Executive Director Koval said the Actuary reviewed the Fund's experience through 6/30/2021 and compared how the claims performed over the past year to the first half of 2021 for all the members and then also Lakewood on its own. For the CJHIF members the medical increases are about 4.19% overall while the Rx is coming in about .66% below last year. The prescription is increasing about

17%, but with the 30% rebates, the prescription renewal will be decreasing. She said the new Rx contract through ESI that is starting 11/1/2021 is not only giving us much better discounts but also we are going to see stronger rebates. With that happening, Lakewood is coming in about flat. Dental and vision are coming in flat for both as well.

Executive Director Koval stated that for Medicare Advantage, the fund agreed to accept Aetna MA renewal at the State level, which will not increase in 2022. A few members have Delta DMO with is increasing about 5% but that is a very small portion of this budget.

Executive Director Koval stated that the MRHIF introduced their budget and you will be seeing an overall 6.9% decrease for reinsurance. . The CJHIF has had consistently good experience in the MRHIF which is reducing this line beyond industry standard.

Executive Director Koval stated that they put a 15% placeholder for the stop loss policy for Lakewood. She stated that they have about a \$380,000 loss fund contingency to protect the budget in case of a high claimants or pandemic changes. It was an increase of about 150% but this number is completely arbitrary and the commissioners can choose to include it or not.

CONTRACTS AND EXPENSES

Executive Director Koval stated the Professional Services RFP responses were reviewed by the Finance and Contracts Committee. There were no competing responses and all fees requested in the RFPs were included in this budget. Most are increasing 2%, yet because of positive negotiations with Aetna, their TPA fees are decreasing 14%. This comes in about 3.2% lower than last year.

ASSESSMENTS

ED Koval explained that assessments are prepared using Fund policy developed over the last several years, including +/-2.5% for loss ratio experience over the past 3 years. Most members are receiving a credit. Medical and Prescription increasing by 1%, dental billing is flat, DMO rates will increase 5% and Lakewood medical and rx will be flat pending confirmation of stop loss charges.

Chairmen Nolan stated that he agrees with the budget and thinks that we should go with it as is.

DIVIDEND

Executive Director Koval explained the \$14 Million dollar surplus and went over the dividend illustration in the agenda that was for \$4.2 million.

Chairmen Nolan stated a dividend this size will be beneficial to the member communities. Lakewood has requested a \$3,000,000 dividend out of their closed year surplus.

Program Manager's Report

September 2021

ELIGIBILTY/ENROLLMENT:

Please direct any eligibility, enrollment, or system related questions to our dedicated CJHIF enrollment team. To contact the team, email cjhifenrollments@permainc.com or fax to 856-552-2175.

MONTHLY BILLING

As a reminder, please be sure to check your monthly invoice for accuracy. *Please confirm the invoice detail, as retro adjustments are limited to two months by Fund policy.* If you find a discrepancy, please report it to the CJHIF eligibility/enrollment team cjhifenrollments@permainc.com or by fax at 856-552-2175.

BROKER CONTACT INFORMATION

Please direct any escalated claims, benefit coverages, prescription coverage, Medicare Advantage or appeal related questions to our dedicated CJHIF Client Servicing Team. To contact the team email: brokerservices@permainc.com.

COVID-19 UPDATES

COVID Resources

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

OPEN ENROLLMENT UPDATE

Annual Open Enrollment - As in previous years, CJHIF holds a passive Open Enrollment, members who want to keep their current elections do not need to take any action. Open Enrollment materials are distributed electronically to group enrollment contacts for employee distribution prior to the OE state date. Open Enrollment information is mailed directly to retirees and COBRA participants.

Important dates for Open Enrollment are below:

- Open Enrollment Begins: 10/18/2021

Open Enrollment Ends: 10/29/2021

- All changes must be entered in Benefit Express: 11/05/2021

Garden State Health Plan Enrollment -

As a follow up to the implementation of last years "NJ Educators Health Plan" as part of the Chapter 44 legislation, School Districts are now required to offer the "Garden State Health Plan" as an additional offering. Garden State Plan rates are being finalized; any CJHIF BOE client will hold Open Enrollment at a later date to be determined.

AETNA UPDATES

Program Manager Pfeiffer explained that they spoke with Aetna this morning about Aetna Medicare Advantage ID Card Changes. They will be reissuing ID cards for all Medicare retirees on January 1, 2022. In advance of the ID card reissue, Aetna will mail an informational postcard advising of the change. Both Aetna and the Program Managers office are preparing to help members if they have any questions since this is a big change for the members. They will have more information and updates in October.

Contract Negotiations with Jefferson Health

Jefferson Health has been having contract negotiations with Aetna for some time now. The new contract is now set to terminate on November 1, 2021. We are currently awaiting a status update to these negotiations.

"Back to Work" COVID-19 Tests:

PM Pfeifer wanted to clarify that your insurance company is not required to cover covid tests that employers mandate. They will only cover if testing meets CDC guidelines, recommended by a physician, or someone had exposure to COVID 19. They will not pay for it if it is a condition of employment.

COBRA SUBSIDY GUIDANCE & NOTICE REMINDER

PM Pfeiffer reminded everyone that the COBRA subsidy expires at the end of the month and that the ARPA subsidy covers 100% of COBRA premiums from <u>April 1 to September 30, 2021</u>. The premium is reimbursed directly to the employer through a COBRA premium assistance credit, and the value of the credit is included in gross income to the employer (but an employer generally could also claim a deduction for this amount.)

APPEALS & ADMINISTRATIVE AUTHORIZATIONS

Program Manager Pfeiffer stated that there have been no appeals received since the last meeting but as previously reported the CJHIF received three attorney appeals related to out of network reimbursement rates. The CJHIF attorney is working on a settlement and will advise once an agreement has been reached.

TREASURER - Fund Treasurer said the bills list and treasurer's report is included in the Agenda.

August 2021- Confirmation of Payment

September Dividend 2021 Resolution 29-21

Dividend	\$3,000,000
Dividella	\$3,000,000

September 2021 Resolution 30-21

FUND YEAR 2021	\$574,730.69
TOTAL ALL FUND YEARS	\$574,730.69

ATTORNEY: Mr. Sahradnik stated that they are working on the claims that were discussed by the Program Manager and hope to have a it resolved before the next meeting.

AETNA: Mr. Silverstein reviewed the claims for June 2021 with an average pepm of \$1,545. He reviewed the claims for July 2021 with an average pepm of \$1,171. He said there were 3 high cost claimants for June and 2 for July. He also reviewed the dashboard report and the weekly covid reporting included with the agenda.

AMERIHEALTH: Kristina Strain reviewed the claims for July 2021 with an average pepm of \$882.41. Rounding out the year paid medical claims the fund had one \$105,670.18. There were no high claimants for the month of July. She reviewed the covid reporting included in agenda.

EXPRESS SCRIPTS: The report is in agenda.

DELTA DENTAL: Mr. Remlinger stated there was nothing to report.

NEW BUSINESS: None

OLD BUSINESS: None

PUBLIC COMMENT: None

MOTION TO APPROVE THE CONSENT AGENDA:

MOTION: Commissioner Valentino SECOND: Commissioner Brach 5 Ayes, 0 Nays

MOTION TO ADJOURN MEETING:

MOTION: Commissioner Valentino SECOND: Commissioner Dempsey

VOTE: Unanimous

MEETING ADJOURNED: 2:30 pm

Minutes Prepared by: Jordyn DeLorenzo, Assisting Secretary

Next Meeting: October 20, 2021 1:30 pm, Zoom Meeting

APPENDIX II

CENTRAL JERSEY HEALTH INSURANCE FUND FINANCE COMMITTEE MEETING September 8, 2021 1:00 PM - ZOOM CALL

ATTENDEES:

William Rieker, Executive Committee Tom Nolan, Executive Committee Chris Mullins, Executive Committee Brian Valentino, Executive Committee Paul Laracy, PERMA Brandon Lodics, PERMA Emily Koval, PERMA Jordyn DeLorenzo, PERMA

The Committee met to review the 2022 CJHIF proposed budget.

Ms. Koval said as we have always done, the fund gave the Actuary the data as of June 2021 for all members including Lakewood and then also Lakewood on its own. The actuary came back with two projections. For the CJHIF members the medical increases are about 4.19% overall. For Lakewood, the overall increase to the medical was just about flat. The Rx renewal for all the members came in about flat as well. She said the new Rx contract that is starting 11/1/2021 is not only giving the fund much better discounts but also the fund is going to see stronger rebates. With that happening, we are able to give a little bit of an extra credit into the Rx claims budget and also increase the Rx rebates. These rebates also include Lakewood prescription. Dental and vision are coming in flat.

Ms. Koval said that our Medicare Advantage product that the fund Executive Members discussed at the previous meeting went with the state negotiated contract. This renewal came in flat for this year and next year. The year after that we are capped at 2% increase.

Ms. Koval said the DMO is going up 5%.

Ms. Koval referenced the reinsurance for Lakewood. She stated that we have not received a stop loss policy so we put a 15% buffer just to prepare for the stop loss policy coming up shortly. It is being reviewed. For CJHIF, the MRHIF introduced their budget with overall came in about 6%. CJHIF is receiving a credit and going just about 7% under last year, which is helping this budget.

She said we added a stop loss contingency as a cushion but this is optional for the committee to choose whether or not they want this.

Mr. Koval stated expenses overall are coming in with a 3% decrease which brings the overall budget is -.51%. A significant portion of that is the Aetna admin fees. We were able to negotiate across the state with about 14% reduction on the admin fees and a couple other positive disclosures in the contract.

AmeriHealth also reduced their fees about 7% while everyone else is going up 2%.

Ms. Koval said assessments include the Loss Ratio Factor of +/- 2.5%

DIVIDEND

Ms. Koval said the Fund has the option to release a dividend to its membership. The Committee discussed and agree to recommend \$4.2 millions as presented.

Lakewood Specifically asked to release a \$3 Millions dividend out of their surplus.

APPENDIX III

Central Jersey Health Insurance Fund (CJHIF) P.O. Box 99106 Camden, NJ 08101

September 2021

<First Name> <Middle Name> <Last Name> <Suffix> <Address> <Address> <City>, <State> <Zip>

Important Notice from CJHIF About Your Prescription Drug Coverage and Medicare

Dear <First Name> <Middle Name> <Last Name> <Suffix>:

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with the CJHIF and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

- 1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
- 2. The CJHIF has determined that the prescription drug coverage offered by the CJHIF is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join a Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th to December 7th.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens to Your Current Coverage if You Decide to Join a Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current CJHIF coverage may be affected. Your current coverage pays for other health expenses in addition to prescription drugs. If you enroll in a Medicare prescription drug plan, you and your eligible dependents may not be eligible to receive all of your current health and prescription drug benefits. If you drop your current prescription drug coverage and enroll in Medicare prescription drug coverage, you may not enroll back into the CJHIF benefit plan during an open enrollment period under the CJHIF benefit plan.

If you do decide to join a Medicare drug plan and drop your current CJHIF coverage, be aware that you and your dependents may not be able to get this coverage back.

When Will You Pay a Higher Premium (Penalty) to Join a Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with the CJHIF and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For More Information About This Notice or Your Current Prescription Drug Coverage...

Contact the person listed below for further information or call PERMA at 866-384-0022 **NOTE:** You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through the CJHIF changes. You also may request a copy of this notice at any time.

For More Information About Your Options Under Medicare Prescription Drug Coverage...

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- Visit www.medicare.gov
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www.socialsecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Sincerely,

PERMA Risk Management Services CJHIF Program Manager

Date: 09/15/2021

Name of Entity/Sender: Central Jersey Health Insurance Fund

Contact--Position/Office: PERMA Program Manager

Address: PO Box 99106, Camden, NJ 08101

Phone Number: 866-834-0022