



AGENDA AND REPORTS

MAY 18, 2022

1:30 PM

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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 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.

CENTRAL JERSEY HEALTH INSURANCE FUND
AGENDA MEETING: MAY 18, 2022
1:30 PM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

FLAG SALUTE

ROLL CALL OF 2022 EXECUTIVE COMMITTEE

Thomas Nolan , Chair – Borough of Brielle
Brian Brach, Secretary– Manasquan RRSA
Diane Lapp, Executive Committee – Township of Manchester
Donato Nieman, Executive Committee – Montgomery Township
Brian Valentino, Executive Committee– Western Monmouth MUA
Brian Dempsey, Executive Committee – Spring Lake Borough
Peter O'Reilly, Executive Committee – Borough of Lakewood
Louis Amoruso, Executive Committee Alternate – Toms River
Angela Morin, Executive Committee Alternate - Aberdeen

APPROVAL OF MINUTES: March 16, 2022 Open: Appendix I

CORRESPONDENCE – None

REPORTS:

EXECUTIVE DIRECTOR (PERMA)

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PROGRAM MANAGER– (Conner Strong & Buckelew)

Monthly Report.....Page 8

TREASURER – (Stephen Mayer)

March and April 2022 Voucher List (Confirmation of Payment)Page 12

May 2022 Voucher List (Resolution 20-22)Page 17

Confirmation of Claims Paid/ Certification of Transfers

Ratification of Treasurers Report

ATTORNEY – (John C. Sahradnik, Esq.)

Monthly Report

NETWORK & THIRD PARTY ADMINISTRATOR – (Aetna)

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NETWORK & THIRD PARTY ADMINISTRATOR – (AmeriHealth)

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PRESCRIPTION ADMINISTRATOR – (Express Scripts)

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DENTAL ADMINISTRATOR – (Delta Dental)

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CONSENT AGENDA..... Page 47

Resolution 17-22: 2021 Audit ApprovalPage 48

Resolution 18-22: Closing of Fund Year 2020Page 51

Resolution 19-22: Lakewood Dividend ApprovalPage 52

Revised Resolution 13-22: Adopting 2022 Wellness Grant Programs.....Page 53

Resolution 18-22: Approval of the March, April & May 2022 Bills ListsPage 54

OLD BUSINESS

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
May 18, 2022

FINANCE AND CONTRACTS

PRO FORMA REPORTS

- **Fast Track Financial Report** – as of February 28, 2022 (page 4)

AUDITOR AND ACTUARY YEAR-END REPORTS

A draft of the Fund Year 2021 Audit, performed by the Fund auditor, Mercadian, is attached. The Finance Committee will be reviewing prior to the meeting and will send a final upon receipt. A representative from Mercadian will be in attendance to present their findings. Should there be any comments, PERMA will be prepared to answer. Resolution 17-22 approving and authorization to file with the state is included in the consent agenda, along with the affidavit to be signed by all present Commissioners.

Once this audit is filed, PERMA recommends the closure of Fund Year 2020. All IBNR has been expensed and there are no outstanding accounts receivable or payable. Resolution 18-22 allows for closing this year.

REQUESTS FOR PROPOSALS

The following positions expire on December 31, 2022: Actuary, Auditor, Attorney, Treasurer. Under the Local Public Contracts law, The Fund has the option to extend these professional service contracts for one additional year, which will be the 2nd and final extension and RFP next year, or the Committee may choose to RFP this year. The Finance and Contracts Committee may have a recommendation to present.

AMERIHEALTH PERFORMANCE GUARENTEE PAYOUT

The Fund received a performance guarantee payout in the amount of \$11,360 for missing the Average Speed of Answer metric.

IBNR CERTIFICATION

Enclosed is the Fund Actuary's IBNR certification, which reflects the changes to the IBNR that had been discussed at the previous meetings.

LAKEWOOD DIVIDEND

The below dividend availability was presented to Lakewood in response to their request to receive a dividend from their closed year balance. The Township has requested to receive a dividend from its own closed year accounting in the amount of \$2,800,000. The Finance Committee will review prior to the meeting.

Resolution 19-22 ratifies the decision.

Lakewood Township	
Closed Year Surplus as of 12/31/2021	\$5,478,468
Recommended 2.5 Months of Claims	\$2,503,769
Available for Dividend	\$2,974,699

WELLNESS APPLICATIONS

The Wellness Committee has approved two additional applications from Montgomery and Lakewood. The below has been updated with these two applications and Revised Resolution 13-22 is in consent.

Group Name	Biometric Screenings (option 1)	Option 2 (Tavi Challenges)	Option 3 (Wellness Days)	Option 4 (EAP)	Option 5 - Build own	Wellness Champion Stipend	Total	Notes
Oceanport				X		\$0.00	\$3,780.00	Preferred Behavior EHP plan for all employees; ALREADY APPROVED
Bedminster		X			X	\$0.00	\$6,500.00	Tavi challenges and Health Lunch Kickoff; ALREADY APPROVED
Highlands BOE					X	\$0.00	\$2,500.00	Wellness Bingo Challenges, Chair Massages, Acupuncture; body composition testing; ALREADY APPROVED
Brielle Township					X	\$500.00	\$5,911.00	Fall Flu Shot Clinic; motivational speaker; walking challenges and incentives; ALREADY APPROVED
Plumsted					X	\$500.00	\$3,167.50	Fall Flu Shot Clinic thru Health Fairs Direct; walking challenges and prizes; ALREADY APPROVED
Aberdeen					X	\$2,100.00	\$19,314.00	Healthy Lunch; gym challenges; 5K runs; Mayors cup softball; pedometers; yoga, tai chi; stand up tops for desks, peddle desk/sitting balls; ALREADY APPROVED
Atlantic Highlands					X	\$0.00	\$9,550.00	Medication review, glucose/AC1 hcecks at local pharmacy; local doc for blood pressure and bone density; gym memberships; incentives; ALREADY APPROVED
Montgomery Twp					X	\$1,000.00	\$9,460.00	Wellness Platform through Wellable; Biometric Screening; Farm Share; Challenges; Wellness Fair
Lakewood Twp						\$1,500.00	\$15,500.00	Health Challenges and Wellnes Fair
Totals							\$60,182.50	
Remainder available for Grants							\$64,817.50	
				Total Request for May approval			\$9,460.00	

2020 MRHIF CLAIMS

In February, the MRHIF has paid the majority of its 2020 high claimant reimbursements in the amount of \$6,181,742.18, of which the CJHIF received \$ 535,905.92. The MRHIF expects to close this year in June with no outstanding liabilities to the Funds.

PROFESSIONAL CONTRACTS - 2023

The Professional Service Contracts for Actuary, Auditor and Attorney have one additional extension year. The Committee may extend the contracts one additional year or go out to RFP.

FINANCIAL DISCLOSURE STATEMENTS

The Financial Disclosure notices have been sent. There are 6 Fund Commissioners who have not yet filed. Please do so ASAP to avoid a fine.

GASB 75 REPORTS

The Fund contracts with an Actuary to provide GASB 75 reports on behalf of its medical members. Please reach out to Emily Koval if your audit requires a full report or update to last year's report. During its 'busy' season, reports can take up to 4 weeks to turn around.

PERMA EMAILS

PERMA has created two new emails that we will be utilizing for different means:

HIFAdmin@permainc.com will be used for agendas and large distribution emails.

HIFFinance@permainc.com will be used for vouchers and invoices. Please send your invoices by the 5th of the month to assure it is paid in the most current month's Bills List.

Members will begin to see communications from these emails soon.

FINANCIAL FAST TRACK REPORT

AS OF	February 28, 2022
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**FUND
BALANCE**

1.	UNDERWRITING INCOME		4,963,328	9,801,618	785,787,690	795,589,309
2.	CLAIM EXPENSES					
		Paid Claims	3,786,623	7,422,174	639,763,444	647,185,618
		IBNR	934,453	1,052,566	3,008,029	4,060,595
		Less Specific Excess	-	-	(18,112,375)	(18,112,375)
		Less Aggregate Excess	-	-	(1,000,000)	(1,000,000)
	TOTAL CLAIMS		4,721,076	8,474,740	623,659,098	632,133,838
3.	EXPENSES					
		MA & HMO Premiums	299,848	442,712	20,626,983	21,069,695
		Excess Premiums	170,677	342,296	36,745,239	37,087,535
		Administrative	301,426	603,195	45,561,334	46,164,529
	TOTAL EXPENSES		771,951	1,388,203	102,933,556	104,321,759
4.	UNDERWRITING PROFIT/(LOSS) (1-2-3)		(529,699)	(61,325)	59,195,036	59,133,711
5.	INVESTMENT INCOME		(18,780)	(55,486)	3,742,437	3,686,950
6.	DIVIDEND INCOME		0	0	7,899,929	7,899,929
7.	STATUTORY PROFIT/(LOSS) (4+5+6)		(548,479)	(116,811)	70,837,402	70,720,591
8.	DIVIDEND		0	0	55,302,477	55,302,477
9.	Transferred Surplus		0	0	0	0

STATUTORY SURPLUS (7-8+9)	(548,479)	(116,811)	15,534,925	15,418,114
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SURPLUS (DEFICITS) BY FUND YEAR

	Closed	Surplus	2,109	(11,992)	5,502,274	5,490,282
		Cash	(68)	(19,718)	6,794,515	6,774,797
2020		Surplus	(9,992)	(18,502)	3,015,566	2,997,063
		Cash	525,933	517,427	2,479,343	2,996,770
2021		Surplus	(921,880)	(1,945,009)	1,704,080	(240,929)
		Cash	(921,910)	(2,799,004)	1,984,695	(814,309)
LAKEWOOD		Surplus	111,645	812,738	5,313,006	6,125,744
		Cash	118,306	250,503	5,103,915	5,354,418
2022		Surplus	269,640	1,045,953		1,045,953
		Cash	(947,305)	(1,872,232)		(1,872,232)

TOTAL SURPLUS (DEFICITS)	(548,479)	(116,811)	15,534,925	15,418,114
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TOTAL CASH	(1,225,043)	(3,923,024)	16,362,469	12,439,444
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CLAIM ANALYSIS BY FUND YEAR

TOTAL CLOSED YEAR CLAIMS			(9,665)	(10,054)	518,003,530	517,993,476
FUND YEAR 2020						
	Paid Claims	6,959	9,846	24,303,459	24,313,305	
	IBNR	-	0	0	0	
	Less Specific Excess	-	0	(737,863)	(737,863)	
	Less Aggregate Excess	-	0	0	0	
TOTAL FY 2020 CLAIMS			6,959	9,846	23,565,596	23,575,443
FUND YEAR 2021						
	Paid Claims	919,759	3,142,045	22,407,794	25,549,840	
	IBNR	0	(1,204,569)	1,747,542	542,973	
	Less Specific Excess	0	0	0	0	
	Less Aggregate Excess	0	0	0	0	
TOTAL FY 2021 CLAIMS			919,759	1,937,476	24,155,336	26,092,813
LAKEWOOD						
	Paid Claims	897,934	1,729,062	59,285,578	61,014,640	
	IBNR	617	(520,544)	1,260,486	739,942	
	Less Specific Excess	0	0	(2,611,431)	(2,611,431)	
	Less Aggregate Excess	0	0	0	0	
TOTAL LAKEWOOD CLAIMS			898,551	1,208,518	57,934,634	59,143,152
FUND YEAR 2022						
	Paid Claims	1,971,636	2,551,274		2,551,274	
	IBNR	933,835	2,777,680		2,777,680	
	Less Specific Excess	0	0		0	
	Less Aggregate Excess	0	0		0	
TOTAL FY 2022 CLAIMS			2,905,471	5,328,954		5,328,954

COMBINED TOTAL CLAIMS	4,721,076	8,474,740	623,659,097	632,133,837
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This report is based upon information which has not been audited nor certified by an actuary and as such may not truly represent the condition of the fund.

CENTRAL JERSEY REGIONAL EMPLOYEE BENEFITS FUND RATIOS

Central Jersey Health Insurance Fund				
RATIOS				
INDICES	2021	JAN	FEB	MAR
Cash Position	16,362,469	\$ 13,664,487	\$ 12,439,444	
IBNR	3,495,077	\$ 3,613,190	\$ 4,547,643	
Assets	20,000,252	\$ 20,559,268	\$ 20,958,736	
Liabilities	4,465,332	\$ 4,592,681	\$ 5,540,627	
Surplus	15,534,920	\$ 15,966,587	\$ 15,418,109	
Claims Paid -- Month	3,420,707	\$ 3,636,789	\$ 3,787,821	
Claims Budget -- Month	3,093,328	\$ 4,186,233	\$ 4,189,821	
Claims Paid -- YTD	35,783,579	\$ 3,636,789	\$ 7,424,610	
Claims Budget -- YTD	37,503,547	\$ 4,186,233	\$ 8,376,054	
RATIOS				
Cash Position to Claims Paid	4.78	3.76	3.28	
Claims Paid to Claims Budget -- Month	1.11	0.87	\$ 0.90	
Claims Paid to Claims Budget -- YTD	0.95	0.87	0.89	
Cash Position to IBNR	4.68	3.78	2.74	
Assets to Liabilities	4.48	4.48	3.78	
Surplus as Months of Claims	5.02	3.81	3.68	
IBNR to Claims Budget -- Month	1.13	0.86	1.09	

Central Jersey Health Insurance Fund

2022 Budget Report

as of February 28, 2022

Expected Losses	Cumulative	Annual	Latest Filed	Cumulative Expensed	\$ Variance	% Variance
Medical Claims AmeriHealth 12/31 Renewal	6,098	36,588	34,607			
Medical Claims AmeriHealth 6/30 Renewal	53,366	319,166	320,509			
Medical Claims Aetna 12/31 Renewal	5,120,051	30,686,614	18,101,481			
Medical Claims Aetna 6/30 Renewal	77,950	467,700	404,913			
Subtotal Medical Claims	5,257,465	31,510,068	18,861,510	4,279,689	982,025	19%
Prescription Claims 12/31 Renewal	1,154,430	6,924,314	6,938,420			
Prescription Claims 6/30 Renewal	34,187	204,597	191,761			
Less Rx Rebates	(356,585)	(2,138,673)	(3,075,321)			
Subtotal Prescription Claims	832,032	4,990,238	4,054,860	807,851	24,181	3%
Dental Claims 12/31 Renewal	289,515	1,727,898	1,732,189			
Dental Claims 6/30 Renewal	3,748	21,308	22,513			
Subtotal Dental Claims	293,263	1,749,206	1,754,702	241,414	51,849	18%
Vision Claims	4,248	26,051	25,222	Included in Medical Claims		
Lakewood SIR Claims						
Medical	1,471,918	8,765,282	8,897,203	755,158	716,760	49%
Prescription	517,128	3,081,269	3,120,890	453,359	63,769	12%
Subtotal Claims	8,376,054	50,122,114	36,714,387	6,537,471	1,838,583	22%
Medicare Advantage / EGWP	497,334	3,096,582	1,651,748	436,485	156,626	26%
Medicare Advantage - Rx	95,777	577,312	555,576	Included in Medicare Advantage / EGWP		
DMO Premiums	6,645	39,113	39,375	6,227	418	6%
Reinsurance						
Specific	178,507	1,070,779	708,768			
Lakewood - ICH	164,110	976,767	1,172,999			
Subtotal Reinsurance	342,617	2,047,546	1,881,767	342,296	321	0%
Loss Fund Contingency	63,657	381,943	381,943	0	63,657	100%
Total Loss Fund	9,382,085	56,264,610	41,224,796	7,322,480	2,059,605	22%
Expenses						
Legal	6,072	36,430	36,430	6,072	(0)	0%
Treasurer	2,083	12,500	12,500	2,083	-	0%
Administrator	84,560	510,162	406,453	84,460	100	0%
Program Manager	314,144	1,900,172	1,329,542	290,483	26,161	8%
Actuary	2,717	16,300	16,300	2,717	-	0%
Auditor	3,333	20,000	20,000	3,333	0	0%
TPA - Aetna	173,632	1,041,049	762,307	175,045	170	0%
TPA - AmeriHealth	1,583	9,498	10,403	Included above in TPA - Aetna		
Plan Documents	2,500	15,000	15,000	Included in Program Manager		
Dental TPA	13,201	79,039	78,250	13,135	66	0%
Wellness	20,833	125,000	125,000	20,833	0	0%
Affordable Care Act	2,138	12,818	9,427	2,138	(0)	0%
A4 Retiree Surcharge	2,823	16,916	15,592	2,436	387	14%
Misc/Cont	3,531	21,185	21,185	435	3,096	88%
Total Expenses	633,150	3,816,070	2,858,389	603,170	29,980	5%
Total Budget	10,015,234	60,080,680	44,083,185	7,925,650	2,089,585	21%

REGULATORY
CENTRAL JERSEY HEALTH INSURANCE FUND
YEAR: 2022 AS OF MAY 11, 2022

<u>Monthly Items</u>	<u>Filing Status</u>
Budget	Filed
Assessments	Filed
Actuarial Certification	Filed
Reinsurance Policies	Filed
Fund Commissioners	Filed
Fund Officers	Filed
Renewal Resolutions	Filed
Indemnity and Trust	Filed
New Members	N/A
Withdrawals	N/A
Risk Management Plan and By Laws	Filed
Cash Management Plan	Filed
Unaudited Financials	12/31/2021 Filed
Annual Audit	12/31/2021 to be filed
Budget Changes	N/A
Transfers	N/A
Additional Assessments	N/A
Professional Changes	N/A
Officer Changes	N/A
RMP Changes	N/A
Bylaw Amendments	N/A
Contracts	Filed
Benefit Changes	N/A

CENTRAL JERSEY REGIONAL HEALTH INSURANCE FUND

Program Manager

May 2022

Program Manager: Conner Strong & Buckelew

Online Enrollment Training: kkidd@permainc.com

Enrollments/Eligibility/Billing: cjhifenrollments@permainc.com

Brokers: brokerservice@permainc.com

ELIGIBILITY/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.

COVERAGE UPDATES:

Covid-19 Oral Prescriptions:

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

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

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

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

EXPRESS-SCRIPTS UPDATE

National Preferred Formulary Update (NPF) - ESI announced their formulary changes effective July 1, 2022. There are 2 CJHIF members impacted by the changes. Impacted members will receive notification from ESI in early June that include equivalent alternatives and are encouraged to discuss them with their physician. Prior authorization approval will be needed in order to remain on the excluded covered drug after July 1, 2022. Please reference Formulary Changes List and updated National Preferred Formulary that will take effect July 1, 2022, provided with PM report. Email notification was sent to brokers on April 14th.

OPERATIONAL UPDATES:

Delta Dental

The Program Manager recommended HIF groups with Delta Dental PPO plans with preventative exams frequencies other than 2 times per calendar year change the frequency to 2 times per calendar year. The recommendation was approved at the March CJHIF meeting to change the frequencies for the 14 groups impacted. Please note this does not apply to groups with Flagship DHMO and/or DeltaCare USA plans as they are state filed plans and cannot be altered. The changes have been made for the CJHIF impacted groups in Delta Dental's system. The change is effective 7/1/22.

2022 LEGISLATIVE REVIEW

COVID -19

1. National Emergency Declaration - Extended through July 15, 2022. The extension is in effect for 90 days. A decision to terminate the declaration or let it expire will be provided with a 60 days' notice prior to termination.
 - Qualified Beneficiaries may wait one year to elect COBRA but must then start to make premium payments
 - Individual has a maximum of one year from date of payment originally would have due, including any applicable grace period
2. At Home COVID-19 Testing- On January 10th, the Biden Administration issued a mandate that takes effects on January 15, 2022, requiring the coverage of At Home/Over the Counter COVID-19 test kits by Employer sponsored health plans. As outlined in the communication sent on January 14, 2022, the HIF will cover the kits under the pharmacy plan (ESI). For groups contracted outside of HIF for their pharmacy benefit, the group should contact their PBM or broker to implement a coverage solution.

Reporting has been requested for those groups that have ESI pharmacy through the HIF, updates will be shared at the next meeting.

Coverage Highlights:

- Date- Starting on January 15, 2022, going forward
- Network – the legislation encourages healthcare insurers to develop a network of locations at which the tests can be purchased with \$0 member cost share at point of service
- Dollar Limit- Up to \$12 per taste
- Quantity Limit- Up to 8 tests per individual per 30 days

FREE Tests from the Government

Starting Tuesday, January 19th, anyone can go to the web site and arrange to have four (4) kits mailed to their home at no cost. The web site is <https://www.COVIDTests.gov>. For those that may not have internet access, there is a toll-free number available to requests tests, 800-232-0233 (TTY 888-720-7489). The White House says tests will begin to get shipped within seven days from ordering. Access to free tests should help relieve employers and plan sponsors from absorbing these additional testing costs.

ESI Highlights:

- Point of service option is now available for members to get tests at the pharmacy counter.
- Mail order options is also available through ESI.
 - Ordering for more than one participant must be done separately.

- ESI will allow up to 8 tests per covered individual per 30 days, regardless of the source used to obtain the kits.
- Communication update was sent on February 11, 2022, outlining the retail and mail order process through ESI. Member communications were included for distribution.

3. Vaccine Mandates – November 4, 2021, OSHA released the *Emergency Temporary Standard*. Which implemented a “vaccine or test,” requirement for Employers over 100 Employees. The Mandate is still not in effect as it has gone through multiple State and Federal Court appeals. Most recently, on January 13, 2022, the US Supreme Court blocked the enforcement of vaccine or testing mandate for businesses with at least 100 employees.

As a reminder testing as an occupational requirement are not covered under Employer Health Plans.

NJ State Form – Retiree Health Benefits Surcharge

Brokers and groups should complete the form with the following information:

Administrator Carrier: Central Jersey Health Insurance Fund

Address: 9 Campus Drive, Suite 216, Parsippany NJ 07054

Contract Effective: 7/1/2022-6/30/2023

Contact Name: Emily Koval

Telephone: 201-518-7028

Mental Health Parity and Addiction Equity Act (MHPAE)

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

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

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

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

Surprise Billing and Transparency – Continued Delays

UPDATE

Aetna is providing the HIF with a unique URL, or hyperlink to post to the Fund’s public website. The URL/hyperlink will need to be posted to the site by July 1, 2022, or upon the group’s renewal date, whichever comes first. The link will automatically refresh each month with any updated information.

The Health Insurance Funds, including Central Jersey protect plan members from surprise billing with involuntary out of network balance bills with a hold harmless clause:

- Example: an in-network surgeon contracts with an out of network anesthesiologist. Should the out of network anesthesiologist balance bill the patient, the Funds would hold the member harmless, paying up to the invoiced amount.

The law also imposes certain requirements on the Carriers, PBMs and healthcare providers. Many of these requirements continue to be delayed, but we will continue to work with the insurance providers to assure the Central Jersey HIF remains compliant.

- Issuing updated ID Cards with additional out of pocket information
- Providing transparency in coverage machine-readable files
- Providing price comparison tools
- Healthcare providers should work with insurance carriers to provide potential patients with good faith estimates of costs

Appeals

Carrier Appeals:

Submission Date	Appeal Type /Carrier	Appeal Number	Reason	Determination	Determination Date
04/11/22	Medical/Aetna	CJHIF-2022-04-01	OON services	Upheld	4/22/2022
05/02/22	Medical/Aetna	CJ-2022-05-01	Experimental	Pending	Pending

IRO Submissions: None

CENTRAL JERSEY HEALTH INSURANCE FUND

BILLS LIST

Confirmation of Payment

MARCH 2022

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 2021

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
001977			
001977	ABERDEEN TOWNSHIP	WELLNESS 2021	25,971.61
			25,971.61
		Total Payments FY 2021	25,971.61

FUND YEAR 2022

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
001978			
001978	AETNA HEALTH MANAGEMENT LLC	MEDICARE ADVTG 3/22	302,217.30
			302,217.30
001979			
001979	DELTACARE USA	BE004814150	1,849.85
			1,849.85
001980			
001980	AETNA LIFE INSURANCE COMPANY	VISION TPA 3/22	121.03
001980	AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 3/22	87,039.38
			87,160.41
001981			
001981	AMERIHEALTH ADMINISTRATORS	WELLNESS CREDIT 3/22	-23.75
001981	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 3/22	739.91
			716.16
001982			
001982	DELTA DENTAL OF NEW JERSEY INC	DENTAL 3/22	6,648.72
			6,648.72
001983			
001983	PERMA RISK MANAGEMENT SERVICES	POSTAGE 2/22	87.77
001983	PERMA RISK MANAGEMENT SERVICES	ADMIN FEE 3/22	42,561.13
			42,648.90
001984			
001984	BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEE 3/22	3,036.00
			3,036.00
001985			
001985	STEPHEN MA YER	TREASURER FEE 3/22	1,041.67
			1,041.67

001986			
001986	CONNER STRONG & BUCKELEW	PLAN DOCUMENTS 3/22	1,250.00
001986	CONNER STRONG & BUCKELEW	NEW MEMBER COMMISSION 3/22	96,814.37
001986	CONNER STRONG & BUCKELEW	PROGRAM MGR FEES 3/22	82,395.66
001986	CONNER STRONG & BUCKELEW	DENTAL 3/22	605.22
001986	CONNER STRONG & BUCKELEW	FUND COORDINATOR 3/22	5,058.69
001986	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 3/22	1,992.72
			188,116.66
001987			
001987	MUNICIPAL REINSURANCE H.I.F.	SPEC REINSURANCE 3/22	89,411.24
			89,411.24
001988			
001988	WESTPORT INSURANCE CORP	SPECIFIC - SINGLE 3/22	13,377.96
001988	WESTPORT INSURANCE CORP	AGGREGATE 3/22	3,243.36
001988	WESTPORT INSURANCE CORP	SPECIFIC_FAMILY 3/22	65,481.60
			82,102.92
		Total Payments FY 2022	804,949.83
		TOTAL PAYMENTS ALL FUND YEARS	830,921.44

Chairperson

Attest:

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

Dated: _____

Treasurer

CENTRAL JERSEY HEALTH INSURANCE FUND

BILLS LIST

Confirmation of Payment

APRIL 2022

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 2022

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
002008			
002008	AETNA HEALTH MANAGEMENT LLC	MEDICARE ADVTG 4/22	303,238.31
			303,238.31
002009			
002009	Flagship Health System	DMO 4/22	1,219.86
			1,219.86
002010			
002010	DELTACARE USA	DELTA DENTAL 4/22	1,913.65
			1,913.65
002011			
002011	AETNA LIFE INSURANCE COMPANY	VISION TPA 4/22	121.03
002011	AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 4/22	86,390.74
			86,511.77
002012			
002012	AMERIHEALTH ADMINISTRATORS	WELLNESS CREDIT 4/22	-26.25
002012	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 4/22	817.79
			791.54
002013			
002013	PAYFLEX	MRRSA&OCEANPORT JAN-MAR 22	378.00
			378.00
002014			
002014	DELTA DENTAL OF NEW JERSEY INC	DENTAL 4/22	6,586.32
			6,586.32
002015			
002015	PERMA RISK MANAGEMENT SERVICES	POSTAGE 3/22	106.37
002015	PERMA RISK MANAGEMENT SERVICES	ADMIN FEE 4/22	42,325.29
			42,431.66
002016			
002016	BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEE 4/22	3,036.00
			3,036.00
002017			
002017	STEPHEN MAYER	TREASURER FEE 4/22	1,041.67
			1,041.67
002018			
002018	MEDICAL EVALUATION SPECIALISTS	MES CASE# 1656132	245.00
			245.00

002019			
002019	CONNER STRONG & BUCKELEW	NEW MEMBER COMMISSION 4/22	67,711.01
002019	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 4/22	1,979.84
002019	CONNER STRONG & BUCKELEW	PLAN DOCUMENTS 4/22	1,250.00
002019	CONNER STRONG & BUCKELEW	PROGRAM MGR FEES 4/22	81,914.70
002019	CONNER STRONG & BUCKELEW	DENTAL 4/22	602.05
002019	CONNER STRONG & BUCKELEW	FUND CO 4/22	5,152.08
			158,609.68
002020			
002020	CONNER STRONG & BUCKELEW	SURETY-POL SELEC INS 5/22-5/23	1,961.00
			1,961.00
002021			
002021	ACCESS	ACCT#430 - ARC & STOR - 3/22	8.38
002021	ACCESS	ACCT#420 - ARC & STOR - 3/22	60.70
002021	ACCESS	ACCT#420 - ARC & STOR - 2.28.22	62.57
002021	ACCESS	ACCT#420 - ARC & STOR - 2/22	8.52
			140.17
002022			
002022	MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINS 4/22	88,674.99
			88,674.99
002023			
002023	WESTPORT INSURANCE CORP	SPECIFIC_SINGLE 4/22	13,295.38
002023	WESTPORT INSURANCE CORP	AGGREGATE 4/22	3,243.36
002023	WESTPORT INSURANCE CORP	SPECIFIC_FAMILY 4/22	65,697.00
			82,235.74
		Total Payments FY 2022	779,015.36
		TOTAL PAYMENTS ALL FUND YEARS	779,015.36

Chairperson

Attest:

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

Dated: _____

Treasurer

CENTRAL JERSEY HEALTH INSURANCE FUND

DIVIDEND BILLS LIST

Confirmation of Payment

APRIL 2022

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.

<u>FUND YEAR CLOSED</u>			
<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
001989-002007	VOID	VOID	
002024			
002024	ATLANTIC HIGHLANDS BOROUGH	DIVIDEND 2022	208,808.15
			208,808.15
002025			
002025	SHREWSBURY TOWNSHIP	DIVIDEND 2022	6,831.24
			6,831.24
002026			
002026	ABERDEEN TOWNSHIP	DIVIDEND 2022	279,357.00
			279,357.00
002027			
002027	SEASIDE HEIGHTS BOE	DIVIDEND 2022	6,086.81
			6,086.81
002028			
002028	WEST LONG BRANCH BOROUGH	DIVIDEND 2022	227,678.89
			227,678.89
002029			
002029	BEDMINSTER TOWNSHIP	DIVIDEND 2022	127,548.29
			127,548.29
002030			
002030	LAKEWOOD TWP FIRE DEPT	DIVIDEND 2022	9,968.79
			9,968.79
002031			
002031	MATAWAN BOROUGH	DIVIDEND 2022	5,849.44
			5,849.44
002032			
002032	TOMS RIVER MUA	DIVIDEND 2022	176,079.99
			176,079.99
002033			
002033	TUCKERTON BOROUGH SCHOOL DISTRICT	DIVIDEND 2022	129,678.21
			129,678.21
002034			
002034	BRICK TOWNSHIP HOUSING AUTHORITY	DIVIDEND 2022	8,888.56
			8,888.56
002035			
002035	CITY OF ASBURY PARK	DIVIDEND 2022	9,320.30
			9,320.30
002036			
002036	HIGHLAND ELEMENTARY SCHOOL	DIVIDEND 2022	85,881.43
			85,881.43
Total Payments FY CLOSED			1,281,977.10
TOTAL PAYMENTS ALL FUND YEARS			1,281,977.10

Chairperson

Attest:

Dated: _____

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

CENTRAL JERSEY HEALTH INSURANCE FUND

BILLS LIST

Resolution No. 20-22

MAY 2022

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 2020

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
002037			
002037	ACCESS	UNPAID INVOICES 2020	120.88
			120.88
		Total Payments FY 2020	120.88

FUND YEAR 2021

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
002038			
002038	MERCADIEN, PC	AUDIT 2021	10,000.00
			10,000.00
002039			
002039	ACCESS	UNPAID INVOICES 2021	324.05
			324.05
		Total Payments FY 2021	10,324.05

FUND YEAR 2022

<u>Check Number</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
002040			
002040	AETNA HEALTH MANAGEMENT LLC	MEDICARE ADVTG 5/22	309,331.52
			309,331.52
002041			
002041	Flagship Health System	MONTGOMERY 5/22	779.21
002041	Flagship Health System	ASBURY CITY 5/22	462.98
			1,242.19
002042			
002042	DELTACARE USA	ASBURY PARK 5/22	1,771.11
			1,771.11
002043			
002043	AETNA LIFE INSURANCE COMPANY	VISION 5/22	126.49
002043	AETNA LIFE INSURANCE COMPANY	MEDICAL 5/22	86,836.68
			86,963.17
002044			
002044	AMERIHEALTH ADMINISTRATORS	WELLNESS CREDIT 5/22	-26.25
002044	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 5/22	817.80
			791.55
002045			
002045	PAYFLEX	MRSSA & OCEANPORT 4/22	129.00
			129.00
002046			
002046	DELTA DENTAL OF NEW JERSEY INC	DENTAL 5/22	6,589.44
			6,589.44

002047			
002047	PERMA RISK MANAGEMENT SERVICES	POSTAGE 4/22	321.79
002047	PERMA RISK MANAGEMENT SERVICES	ADMIN FEES 5/22	42,633.70
			42,955.49
002048			
002048	BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEE 5/22	3,036.00
			3,036.00
002049			
002049	STEPHEN MAYER	TREASURER FEE 5/22	1,041.67
			1,041.67
002050			
002050	CONNER STRONG & BUCKELEW	PLAN DOCUMENTS 5/22	1,250.00
002050	CONNER STRONG & BUCKELEW	NEW MEMBER COMM 5/22	68,586.17
002050	CONNER STRONG & BUCKELEW	PROGRAM MANAGER 5/22	82,599.06
002050	CONNER STRONG & BUCKELEW	DENTAL 5/22	594.64
002050	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 5/22	1,989.96
002050	CONNER STRONG & BUCKELEW	FUND COORD 5/22	5,152.09
			160,171.92
002051			
002051	CONNER STRONG & BUCKELEW	IMPLEMENTATION FEES 2022	21,825.00
			21,825.00
002052			
002052	MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 5/22	89,463.85
			89,463.85
002053			
002053	WESTPORT INSURANCE CORP	SPECIFIC - SINGLE 5/22	13,295.38
002053	WESTPORT INSURANCE CORP	AGGREGATE 5/22	3,215.52
002053	WESTPORT INSURANCE CORP	SPECIFIC - FAMILY 5/22	64,835.40
			81,346.30
		Total Payments FY 2022	806,658.21
		TOTAL PAYMENTS ALL FUND YEARS	817,103.14

Chairperson

Attest:

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

Dated: _____

Treasurer

Central Jersey Municipal Employee Benefits Fund										
SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED										
Current Fund Year: 2022 Month Ending: March										
	Medical	Dental	Rx	Vision	Medicare Advantage	Reinsurance	DMO Premiums	Future	Admin	TOTAL
OPEN BALANCE	5,031,814.45	655,106.25	3,274,438.06	49,031.95	3,856,814.33	(131,740.05)	3,219.41	0.00	(299,244.96)	12,439,439.44
RECEIPTS										
Assessments	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Invest Pymnts	317.61	31.61	202.00	2.14	175.77	0.00	0.14	0.00	11.74	741.01
Invest Adj	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Subtotal Invest	317.61	31.61	202.00	2.14	175.77	0.00	0.14	0.00	11.74	741.01
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	317.61	31.61	202.00	2.14	175.77	0.00	0.14	0.00	11.74	741.01
EXPENSES										
Claims Transfers	4,395,168.69	170,034.64	645,020.11	0.00	0.00	0.00	0.00	0.00	0.00	5,210,223.44
Expenses	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	830,921.44	830,921.44
Other *	0.00	0.00	213,227.30	0.00	0.00	0.00	0.00	0.00	0.00	213,227.30
TOTAL	4,395,168.69	170,034.64	858,247.41	0.00	0.00	0.00	0.00	0.00	830,921.44	6,254,372.18
END BALANCE	636,963.37	485,103.22	2,416,392.65	49,034.09	3,856,990.10	(131,740.05)	3,219.55	0.00	(1,130,154.66)	6,185,808.27

CERTIFICATION AND RECONCILIATION OF CLAIMS PAYMENTS AND RECOVERIES									
Central Jersey Municipal Employee Benefits Fund									
Month		March							
Current Fund Year		2022							
		1.	2.	3.	4.	5.	6.	7.	8.
Policy Year	Coverage	Calc. Net Paid Thru Last Month	Monthly Net Paid March	Monthly Recoveries March	Calc. Net Paid Thru March	TPA Net Paid Thru March	Variance To Be Reconciled	Delinquent Unreconciled Variance From	Change This Month
2022	Medical	1,786,304.40	3,564,247.25	0.00	5,350,551.65	0.00	5,350,551.65	1,786,304.40	3,564,247.25
	Dental	165,362.86	170,034.64	0.00	335,397.50	0.00	335,397.50	165,362.86	170,034.64
	Rx	956,376.82	645,020.11	0.00	1,601,396.93	0.00	1,601,396.93	956,376.82	645,020.11
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	2,908,044.08	4,379,302.00	0.00	7,287,346.08	0.00	7,287,346.08	2,908,044.08	4,379,302.00

SUMMARY OF CASH AND INVESTMENT INSTRUMENTS					
Central Jersey Municipal Employee Benefits Fund					
ALL FUND YEARS COMBINED					
CURRENT MONTH	March				
CURRENT FUND YEAR	2022				
		Description:	N.J.C.M.F.	Investments	Ocean First Admin.
		ID Number:			
		Maturity (Yrs)			
		Purchase Yield:			
		TOTAL for All			
		Accts & instruments			
Opening Cash & Investment Balance	\$ 12,439,439.34	\$ 3,657,218.99	\$ 7,687,865.05	\$ 1,094,355.30	
Opening Interest Accrual Balance	\$ 2,053.73	\$ -	\$ 2,053.73	\$ -	
1	Interest Accrued and/or Interest Cost	\$0.00	\$0.00	\$0.00	\$0.00
2	Interest Accrued - discounted Instr.s	\$0.00	\$0.00	\$0.00	\$0.00
3	(Amortization and/or Interest Cost)	\$0.00	\$0.00	\$0.00	\$0.00
4	Accretion	\$0.00	\$0.00	\$0.00	\$0.00
5	Interest Paid - Cash Instr.s	\$741.03	\$0.00	\$0.00	\$741.03
6	Interest Paid - Term Instr.s	\$0.00	\$0.00	\$0.00	\$0.00
7	Realized Gain (Loss)	\$0.00	\$0.00	\$0.00	\$0.00
8	Net Investment Income	\$741.03	\$0.00	\$0.00	\$741.03
9	Deposits - Purchases	\$8,492,784.16	\$0.00	\$0.00	\$8,492,784.16
10	(Withdrawals - Sales)	-\$5,423,450.74	\$0.00	\$0.00	-\$5,423,450.74
Ending Cash & Investment Balance		\$15,509,513.79	\$3,657,218.99	\$7,687,865.05	\$4,164,429.75
Ending Interest Accrual Balance		\$2,053.73	\$0.00	\$2,053.73	\$0.00
Plus Outstanding Checks		\$65,995.79	\$0.00	\$0.00	\$65,995.79
(Less Deposits in Transit)		\$0.00	\$0.00	\$0.00	\$0.00
Balance per Bank		\$15,575,509.58	\$3,657,218.99	\$7,687,865.05	\$4,230,425.54



CENTRAL JERSEY HEALTH INSURANCE FUND

Monthly Claim Activity Report

May 18, 2022



CENTRAL JERSEY HEALTH INSURANCE FUND

	MEDICAL CLAIMS PAID 2021	# OF EES	PER EE	MEDICAL CLAIMS PAID 2022	# OF EES	PER EE
JANUARY	\$2,525,722	1,600	\$ 1,579	\$2,880,916	2158	\$1,335
FEBRUARY	\$1,782,274	1,595	\$ 1,117	\$2,916,816	2143	\$1,361
MARCH	\$2,242,793	1,600	\$ 1,402	\$3,647,050	2139	\$1,705
APRIL	\$1,950,954	1,603	\$ 1,217			
MAY	\$2,074,353	1598	\$ 1,298			
JUNE	\$2,464,841	1,595	\$ 1,545			
JULY	\$1,842,582	1,573	\$ 1,171			
AUGUST	\$2,337,237	1,564	\$ 1,494			
SEPTEMBER	\$1,997,210	1,565	\$ 1,276			
OCTOBER	\$2,228,242	1,565	\$ 1,424			
NOVEMBER	\$2,237,858	1,567	\$ 1,428			
DECEMBER	\$2,368,687	1,558	\$ 1,520			
TOTALS	\$26,052,753			\$9,444,782		
				2022 Average	2,147	\$ 1,467
				2021 Average	1,582	\$ 1,373

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

Plan Sponsor Unique ID : All
Customer: CENTRAL JERSEY HEALTH INSURANCE FUND
Group / Control: 00143735,00285786,00659552,00737415,00866354,SI362223

Paid Dates: 02/01/2022 - 02/28/2022
Service Dates: 01/01/2011 - 02/28/2022
Line of Business: All

	Billed Amt	Paid Amt
	\$208,120.76	\$71,872.02
	\$119,192.87	\$65,366.43
	\$94,491.87	\$65,057.13
	\$276,307.49	\$50,872.51
Total:	\$698,112.99	\$253,168.09

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

Plan Sponsor Unique ID : All
Customer: CENTRAL JERSEY HEALTH INSURANCE FUND
Group / Control: 00143735,00285786,00659552,00737415,00866354,SI362223

Paid Dates: 03/01/2022 - 03/31/2022
Service Dates: 01/01/2011 - 03/31/2022
Line of Business: All

	Billed Amt	Paid Amt
	\$293,470.64	\$119,010.26
	\$210,992.45	\$98,437.61
	\$148,552.78	\$76,991.48
	\$87,542.68	\$70,812.40
	\$202,230.49	\$66,933.89
	\$73,961.63	\$62,383.66
	\$101,762.64	\$52,387.92
Total:	\$1,118,513.31	\$546,957.22



**Medical Claims Paid Per Member:
January 2022- March 2022**

Total Medical Paid per EE: **\$1,467**

Network Discounts

Inpatient: **60.5%**
Ambulatory: **64.5%**
Physician/Other: **65.4%**
TOTAL: 64.0%

Provider Network

% Admissions In-Network: **97.6%**
% Physician Office: **89.3%**

Aetna Book of Business:
Admissions 98.4%; Physician 90.0%

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

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

**Catastrophic Claim Impact
(January 2022 – March 2022)**

Number of Claims Over \$50,000: **23**
Claimants per 1000 members: **4.3**
Avg. Paid per Claimant: **\$115,837**
Percent of Total Paid: **29.5%**
• Aetna BOB- HCC account for an average of 41.0% of total Medical Cost

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

Total Members Identified: **658**
Members Targeted for 1:1 Nurse Support : **100**
Members Targeted for Digital Activity: **558**
Member 1:1 outreach completed: **97**
Member 1:1 Outreach in Progress: **3**

**Teladoc Activity:
January 2022– March 2022**

Total Registrations: **56**
Total Online Visits: **95**
Total Net Claims Savings: **\$45,483**
Total Visits w/ Rx: **78**
Mental Health Visits: **3**
Dermatology Visits: **3**

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

**Customer Service Performance
(Q1 2022)**

1st Call Resolution: **94.2%**
Abandonment Rate: **2.6%**
Avg. Speed of Answer: **56.2 sec**

**Claims Performance
(Q4 2021)**

Financial Accuracy: **98.78%**
(Q1 2022)
90% processed w/in: **20.3 days**
95% processed w/in: **45.0 days**

**Claims Performance (Monthly)
(March 2022)**

90% processed w/in: **14.2 days**
95% processed w/in: **24.5 days**
(Note: This is not a PG metric)

Performance Goals

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

Financial Accuracy: **99%**

Turnaround Time

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

COVID-19 population alerts

Hot Spots In the United States - Map (to the right)

The map shows how the number of new cases have *CHANGED* in the last two weeks across the U.S. (not plan sponsor-specific). This provides an indication of which direction the level of new cases is trending.

County Alerts (below)

The tables below show the average daily new cases per 100,000 individuals by county over the past 7 days. These rates are reflective of the overall population of the county, not of your specific membership. We are providing this information to inform you where you have membership in counties that are experiencing a high or emerging rate of new cases.

The CDC collects new case counts at the county level. We are using this information to calculate a "7 day average new case count." This data is then normalized for population size (new cases per 100,000 individuals) to smooth unusual daily highs or lows, often caused by data collection fluctuations.

The county information below is for your top 25 counties (by membership) which have been identified as having either a high (>25) or emerging (10-24) average daily case rate. Note: There could be less than 25 counties in the tables or none at all if the alert criteria is not met in counties where you have membership.



Heat map of recent growth by county: This map shows the percentage change in cases between the last seven days and the previous seven days. Darker colors indicate an increasing trend while lighter colors indicate a decreasing trend. Last Updated: 05/02/2022 | Source: CDC

High risk counties (red) had greater than 25 daily new cases per 100,000 people last week

Emerging risk counties (orange) had between 10 and 25 daily new cases per 100,000 people last week

Scroll to the end of this report for a list of the top 50 counties with the highest average daily new case counts where you have membership

High Risk (>25 new cases per 100,000 individuals)*

State, County	County population	Your members	Avg daily new cases per 100K
NJ, Monmouth	618,795	1,040	28.1
NJ, Middlesex	825,062	753	27.3
NJ, Somerset	328,934	157	30.1
NJ, Mercer	367,430	62	35.6
NJ, Morris	491,845	26	31.5
FL, Palm Beach	1,496,770	7	31.3
FL, Indian River	159,923	6	25.2
MA, Norfolk	706,775	5	26.5
FL, Broward	1,952,778	5	34.6
FL, Monroe	74,228	4	32.1
CO, Denver	727,211	2	28.6
VT, Windsor	55,062	2	30.4
PA, Bradford	60,323	2	44.1
VT, Washington	58,409	1	67.5

Emerging Risk (10-24 new cases per 100,000 individuals)*

State, County	County population	Your members	Avg daily new cases per 100K
NJ, Ocean	607,186	2,842	17.0
NJ, Hunterdon	124,371	60	19.6
NJ, Burlington	445,349	38	19.9
NJ, Warren	105,267	31	14.8
NJ, Union	556,341	19	22.7
NJ, Atlantic	263,670	15	15.8
FL, Lee	770,577	13	19.5
FL, Collier	384,902	11	21.3
NJ, Essex	798,975	11	23.1
PA, Bucks	628,270	7	12.4
FL, Seminole	471,826	6	19.0
NJ, Cape May	92,039	5	18.8
NC, Mecklenburg	1,110,356	5	13.3
FL, Marion	365,579	4	10.9
FL, Pinellas	974,996	4	20.2
OH, Delaware	209,177	4	13.7
FL, Polk	724,777	4	15.8
FL, Lake	367,118	4	20.2
FL, St. Lucie	328,297	4	16.6
FL, Pasco	553,947	3	16.1
NJ, Sussex	140,488	3	24.3
DE, Sussex	234,225	3	15.4
NC, Wake	1,111,761	2	19.2
FL, St. Johns	264,672	2	12.4
FL, Sarasota	433,742	2	24.8

* Counties with less than 20 new cases in the prior week will not appear in this report. New case data is not available for approximately thirty counties. County population is based on 2010 Census data. "Your members" represents your total Aetna self-insured membership.







COVID-19 Claims Activity

What claims have been adjudicated for COVID-19 related diagnoses and/or testing?

Use these insights to:

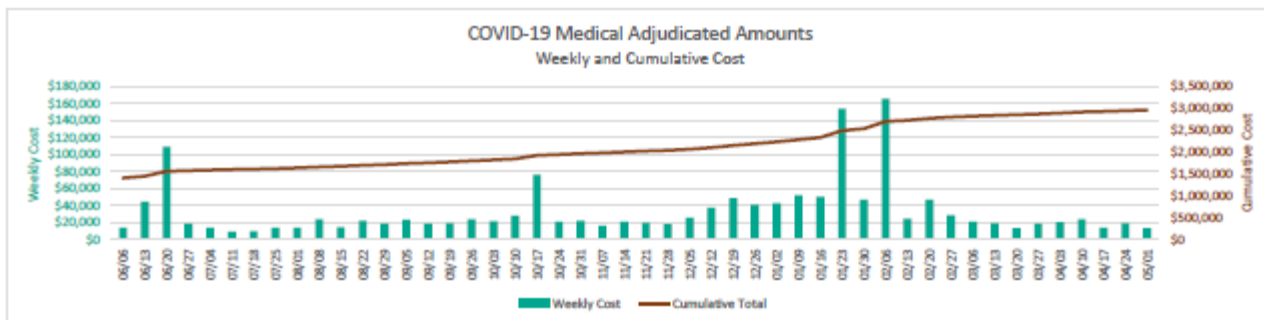
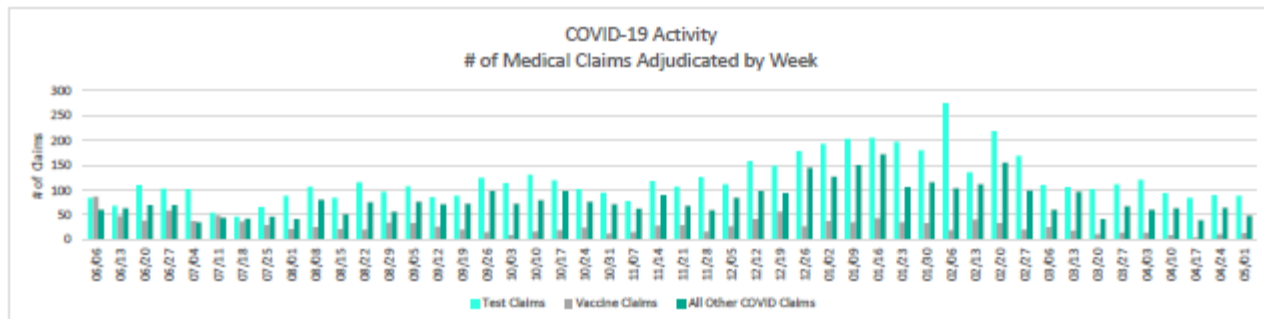
- ✓ Monitor estimated weekly plan expenses associated with COVID-19
- ✓ Understand the relative impact on overall claim spend

At a glance

	 COVID-19 paid	Number of Claims		Unique Claimants (claimants may be counted in each category)		
		 Tests	 Vaccine	 Tests	 Vaccine Administration*	 All Other Claims
Current Week	\$12,824	88	13	80	13	43
3/01/20 - 5/01/22	\$2,958,415	11,860	2,765	3,288	1,447	2,685

*Vaccine data includes medical and pharmacy for Aetna administered plans

How does this week compare to previous weeks?






Telemedicine Monitor

What is the recent Telemedicine claims activity?

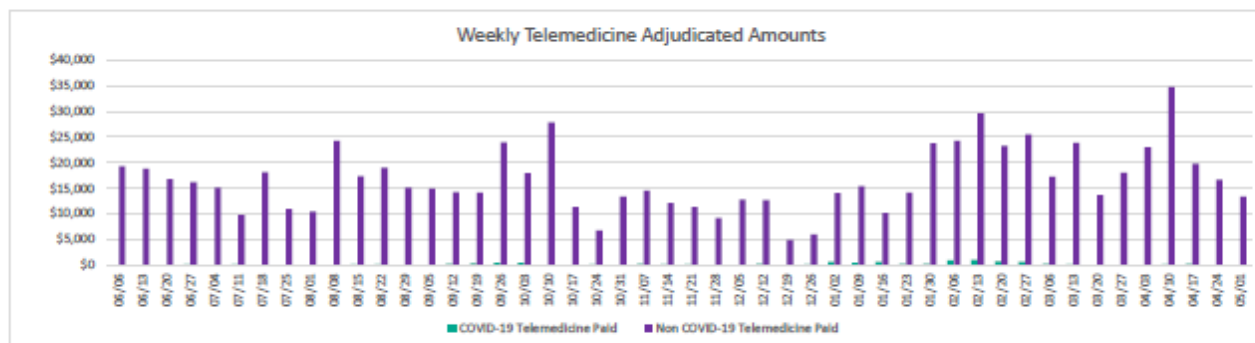
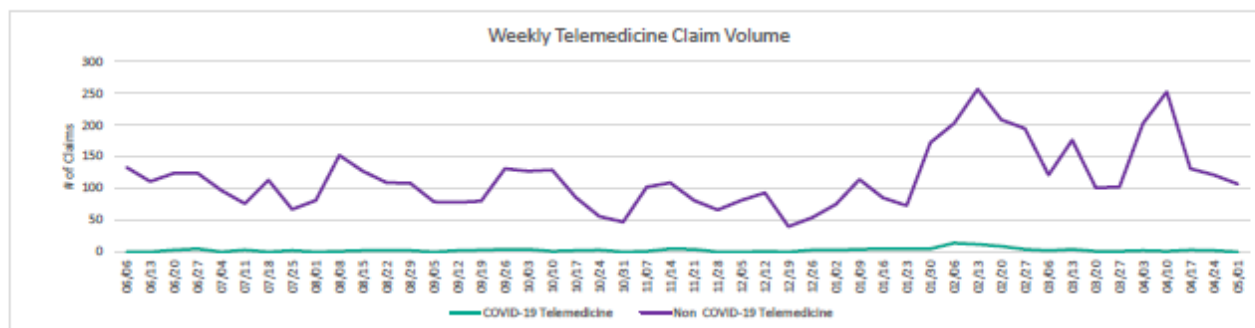
Use these insights to

- ✓ Review monthly growth of both Teladoc and community based providers providing approved telemedicine services
- ✓ Understand trends driven by COVID-19 related claims versus overall utilization for non-virus related conditions

At a glance

	 COVID-19 telemedicine paid	 Non COVID-19 telemedicine paid	 COVID-19 telemedicine claims	 Non COVID-19 telemedicine claims
Current Week	\$0	\$13,281	0	107
3/01/20 - 5/01/22	\$35,661	\$1,790,583	475	13,829

How is Telemedicine changing over time?



Total Weekly Adjudicated Medical Claims

What is the overall adjudicated claim activity on a weekly basis?

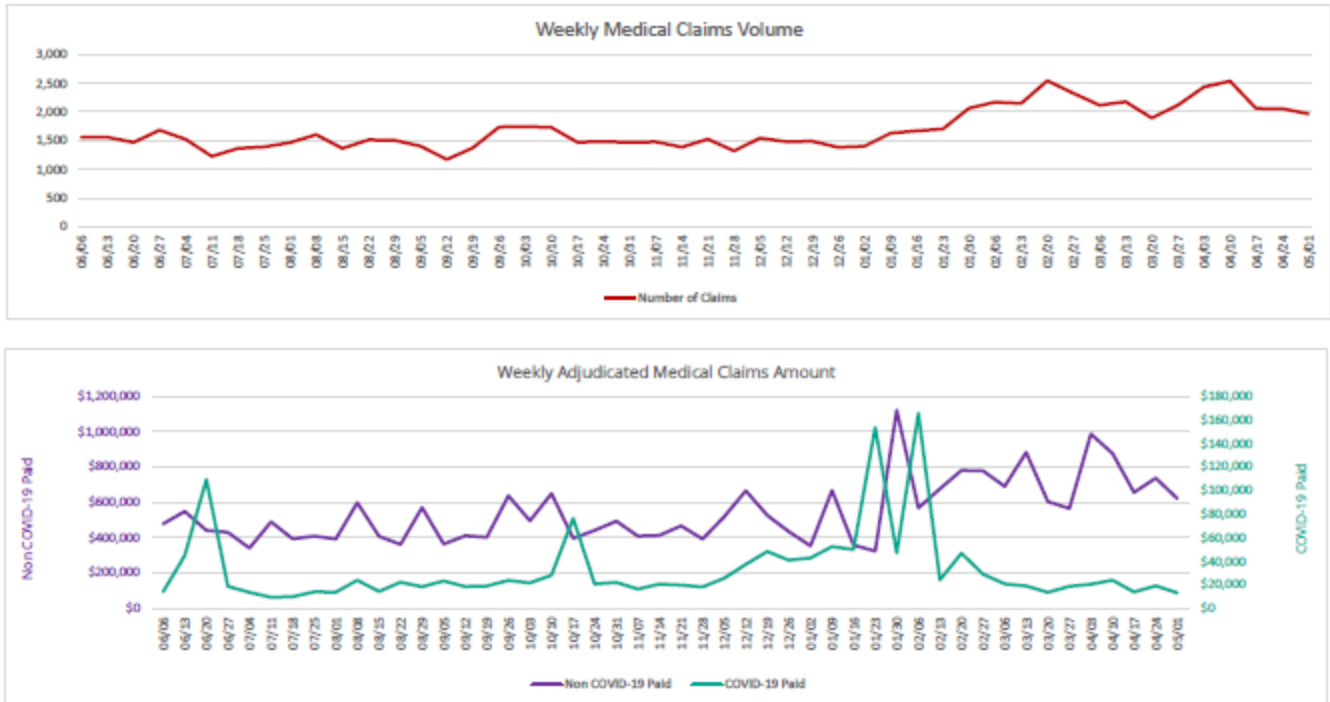
Use these insights to:

- ✓ Monitor weekly changes in claim levels for COVID-19 vs. other claim expenses
- ✓ Review how weekly claims are trending compared to anticipated levels or prior year experience

At a glance



How does this week compare to previous weeks?

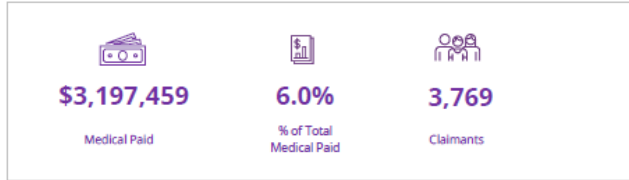


At a glance COVID-19 All-time experience

Average Members: 4,070

Time period: Jan 2020 - Mar 2022, paid through March 2022

Key Statistics (Medical Claims Only)



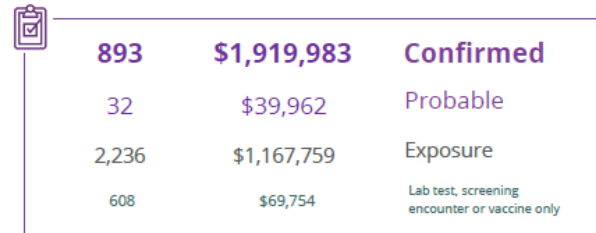
More detailed information is found on the next page to help you answer critical questions:

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

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

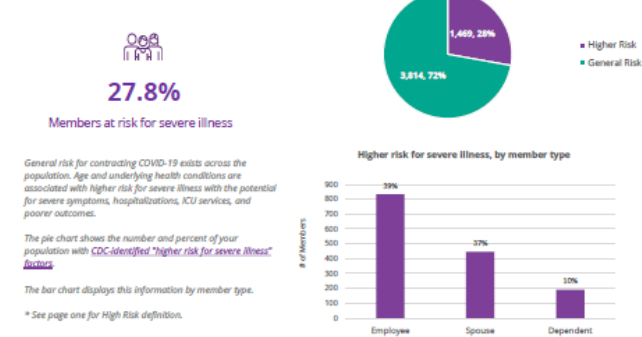
Claimant Distribution*

How your total claimants break down based on diagnosis code information

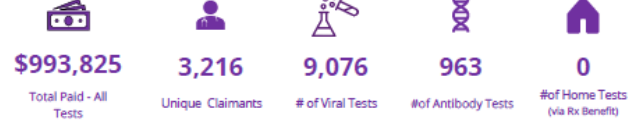


*Refer to Report terms on page 1

COVID-19 population risk*



Testing



Vaccine Administration (Medical & Pharmacy)*

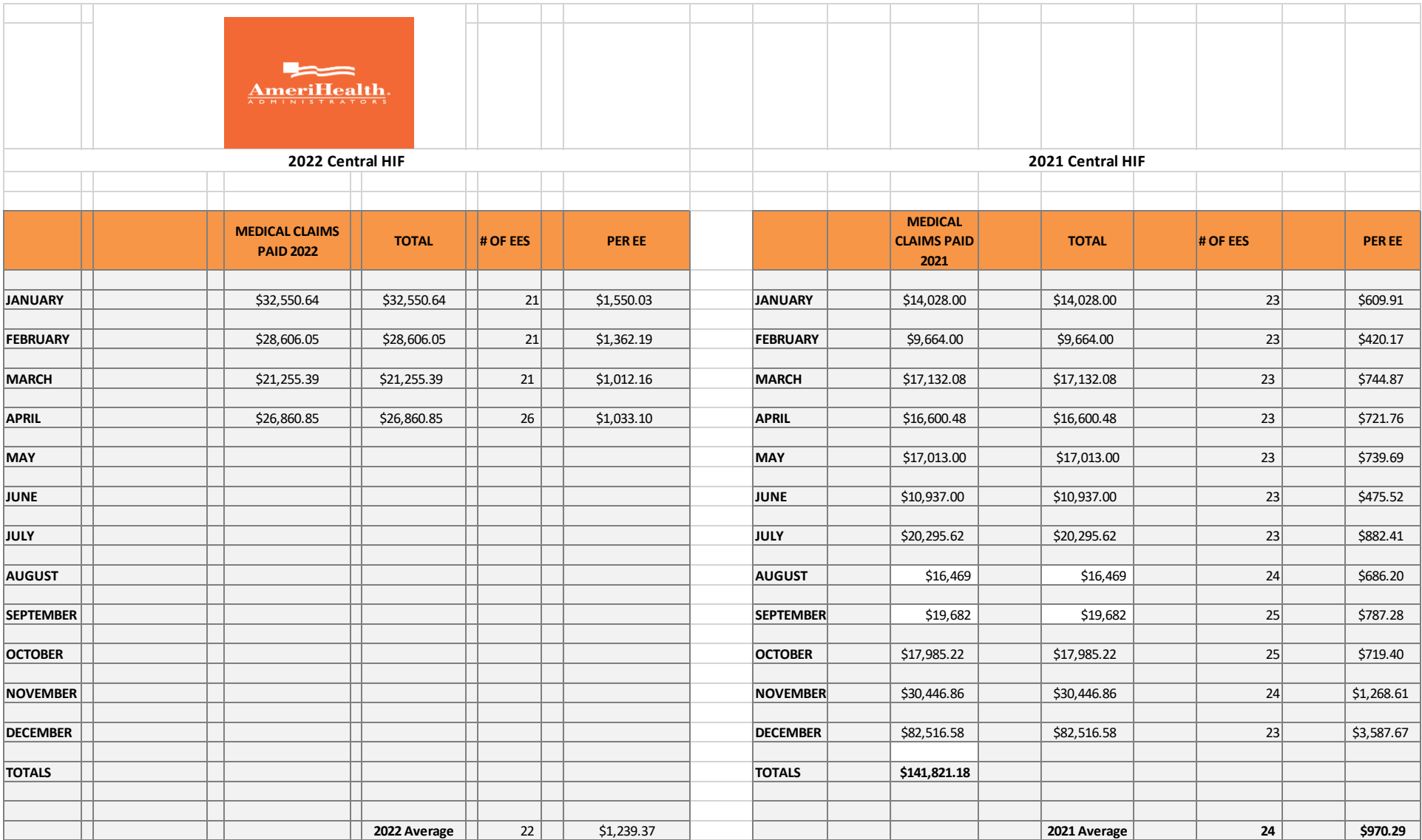


*Includes claims paid under the Aetna Pharmacy benefit plan if applicable

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



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CENTRAL NEW JERSEY HEALTH INSURANCE FUND - 0002189322

Claims Incurred between 3/1/2020 and 5/11/2022 and Paid between 3/1/2020 and 5/11/2022

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

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
<1	3	3	\$195.84	\$65.28	\$21.76
1-5	4	11	\$1,205.03	\$109.55	\$12.17
6-18	13	48	\$5,446.68	\$113.47	\$13.82
19-25	3	12	\$1,221.03	\$101.75	\$10.62
26-39	8	34	\$5,326.75	\$156.67	\$23.89
40-64	23	100	\$15,686.07	\$156.86	\$22.03
65+	1	6	\$341.00	\$56.83	\$14.21
Unknown	0	0	\$0.00	\$0.00	\$0.00

REL TO INS	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Employee	18	94	\$12,512.14	\$133.11	\$21.28
Spouse	12	45	\$8,841.68	\$196.48	\$24.22
Dependent	24	75	\$8,068.58	\$107.58	\$12.95

GENDER	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Female	28	142	\$20,829.23	\$146.68	\$24.48
Male	26	72	\$8,593.17	\$119.35	\$11.85
Undisclosed	0	0	\$0.00	\$0.00	\$0.00

ST CD	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
NJ	54	214	\$29,422.40	\$137.49	\$18.67

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	\$4.57
Emergency Room With Observation Bed	1	1	\$0.00	\$0.00	\$0.00
Office Physician Visit	5	6	\$784.23	\$130.70	\$0.50
Pathology (Laboratory)	48	136	\$13,803.95	\$101.50	\$8.76
Telemedicine	3	3	\$192.77	\$64.26	\$0.12
Urgent Care	19	41	\$6,362.30	\$155.18	\$4.04

Inpatient Cost and Utilization by Age Band

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	ADM CNT	NET PAY	ADM PER 1000	COST PER ADM	COST PMPM	AVG LOS
<1	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00
1-5	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00
6-18	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00
19-25	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00
26-39	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00
40-64	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00
65+	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00
Unknown	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00

TOP PROVIDERS(TOP 25 BY NET PAYMENT)

PROVIDER NAME	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Southern Ocean Medical Center	15	26	\$5,761.73	\$221.60	\$3.66
GENESIS LABORATORY MANAGEMENT	8	16	\$4,306.50	\$269.16	\$2.73
Labcorp Raritan	31	43	\$4,010.65	\$93.27	\$2.54
AtlantiCare Physician Group	9	19	\$2,975.43	\$156.60	\$1.89
Atlanticare Regional Medical Center	1	1	\$1,638.78	\$1,638.78	\$1.04
SUMMIT MEDICAL GROUP PA	6	8	\$1,247.08	\$155.88	\$0.79
EMEDICAL OFFICES	1	4	\$888.00	\$222.00	\$0.56
Barron Emergency Physicians	1	1	\$849.39	\$849.39	\$0.54
Pediatric Affiliates PA	6	16	\$782.85	\$48.93	\$0.50
Quest Diagnostics Inc	7	8	\$742.13	\$92.77	\$0.47
Bio Reference Laboratory Inc	3	4	\$670.00	\$167.50	\$0.43
Marlboro Medical Center LLC	2	3	\$636.59	\$212.20	\$0.40
MVP Medical Associates	2	4	\$530.00	\$132.50	\$0.34
Jersey Irish Medical	2	3	\$435.00	\$145.00	\$0.28
Minute Clinic Dgnstc Of New Jersey L	13	23	\$412.94	\$17.95	\$0.26
THERANOSTIX INC	1	2	\$400.00	\$200.00	\$0.25
Atlantic Emergency Assoc Pa	1	1	\$324.20	\$324.20	\$0.21
TEMPUS LABS INC.	3	3	\$300.00	\$100.00	\$0.19
Urgent Care Physicians of New Jersey Llc	1	4	\$280.00	\$70.00	\$0.18
	3	3	\$223.87	\$74.62	\$0.14
ATLANTICARE CLINICAL LABORATOR	2	2	\$218.00	\$109.00	\$0.14
AEGIS SCIENCES CORPORATION	2	2	\$200.00	\$100.00	\$0.13
Accu Reference Medical Lab	1	1	\$200.00	\$200.00	\$0.13
City Medical of New Jersey PC	1	1	\$180.00	\$180.00	\$0.11
KENNEDY UNIVERSITY HOSPITAL GAC	1	1	\$154.91	\$154.91	\$0.10

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

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	1	3	\$139.24	\$34.81
19-25	0	1	1	\$94.38	\$47.19
26-39	0	1	1	\$94.34	\$47.17
40-64	0	6	4	\$355.94	\$35.59
65+	0	0	1	\$39.00	\$39.00
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	5	7	\$1,325.00	\$265.00
19-25	1	4	\$584.52	\$584.52
26-39	4	7	\$1,508.00	\$377.00
40-64	9	21	\$2,849.30	\$316.59
65+	1	2	\$95.48	\$95.48
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



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Central Jersey Health Insurance Fund

Total Component/ Date of Service (Month)	2021 01	2021 02	2021 03	2021 Q1	2021 04	2021 05	2021 06	2021 Q2	2021 07	2021 08	2021 09	2021 Q3	2021 10	2021 11	2021 12	2021 Q4	2021 YTD
Membership	3,126	3,118	3,129	3,124	3,133	3,130	3,120	3,128	3,127	3,071	3,091	3,096	3,080	3,089	3,087	3,085	3,108
Total Days	118,409	109,552	127,836	355,797	120,113	135,386	117,483	372,982	111,788	123,980	119,494	355,262	111,939	118,519	116,928	347,386	1,431,427
Total Patients	1,072	999	1,130	1,670	1,090	1,176	1,119	1,714	1,119	1,125	1,115	1,733	1,119	1,139	1,166	1,740	2,418
Total Plan Cost	\$493,344	\$604,746	\$621,560	\$1,719,649	\$580,492	\$695,641	\$557,038	\$1,833,171	\$534,820	\$635,822	\$608,084	\$1,778,725	\$598,566	\$484,145	\$627,854	\$1,710,565	\$7,042,110
Generic Fill Rate (GFR) - Total	84.9%	84.1%	82.8%	83.9%	84.1%	85.3%	84.1%	84.6%	85.6%	85.1%	85.0%	85.2%	84.3%	86.1%	86.2%	85.6%	84.8%
Plan Cost PMPM	\$157.82	\$193.95	\$198.64	\$183.47	\$185.28	\$222.25	\$178.54	\$195.37	\$171.03	\$207.04	\$196.73	\$191.49	\$194.34	\$156.73	\$203.39	\$184.81	\$188.79
Total Specialty Plan Cost	\$187,077	\$274,690	\$244,301	\$706,068	\$228,316	\$327,857	\$223,147	\$779,320	\$204,468	\$264,380	\$270,664	\$739,512	\$236,264	\$181,447	\$280,003	\$697,713	\$2,922,613
Specialty %of Total Specialty Plan Cost	37.9%	45.4%	39.3%	41.1%	39.3%	47.1%	40.1%	42.5%	38.2%	41.6%	44.5%	41.6%	39.5%	37.5%	44.6%	40.8%	41.5%

Total Component/ Date of Service (Month)	2022 01	2022 02	2022 03	2022 Q1	2022 04	2022 05	2022 06	2022 Q2	2022 07	2022 08	2022 09	2022 Q3	2022 10	2022 11	2022 12	2022 Q4	2022 YTD
Membership	3,065	3,062	3,057	3,061													
Total Days	122,231	107,099	122,722	352,052													
Total Patients	1,137	1,060	1,184	1,747													
Total Plan Cost	\$562,533	\$566,650	\$679,143	\$1,808,326													
Generic Fill Rate (GFR) - Total	85.7%	84.9%	86.7%	85.8%													
Plan Cost PMPM	\$183.53	\$185.06	\$222.16	\$196.90													
%Change Plan Cost PMPM	16.3%	-4.6%	11.8%	7.3%													
Total Specialty Plan Cost	\$188,196	\$264,065	\$337,295	\$789,556													
Specialty %of Total Specialty Plan Cost	33.5%	46.6%	49.7%	43.7%													

PMPM	
Q1 2021	\$183.47
Q1 2022	\$196.90
Trend - 2022 YTD	7.3%



Claims Summary

CENTRAL JERSEY HEALTH INSURANCE FUND - 03601

January 2021 - December 2021

Cost Containment

Claims	Dollars	Definition
Submitted Claims	\$3,980,838	Claims submitted by participating and non-participating dentists
(-) Savings		
(-)Network Discount	\$930,433	Savings from network participating dentist discounts
(-)Administrative	\$581,361	Contract limits, non-covered, non-billable services, optional services
(-)Dental Consultant	\$42,173	Clinical claim review by dental consultants
(-)Eligibility Verification	\$35,378	Claims for in-eligible members
(-)COB	\$134,872	Coordination of benefits
(-)Other	\$811,992	Deductibles, non-covered services, patient copay
(=)Total Savings	\$2,536,209	
Delta Dental Paid	\$1,444,629	Amount paid by Delta Dental

Network Discount

Network	Submitted Claims	Paid Claims	Network Discount	Network Discount / Submitted Claims	Contribution To Network Savings = Network Discount/Total In-Network Savings
Delta Dental Premier	\$1,342,397	\$607,271	\$292,568	21.79%	31.44%
Delta Dental PPO	\$2,110,229	\$685,492	\$572,322	27.12%	61.51%
Delta Dental Advantage	\$219,390	\$89,481	\$65,543	29.88%	7.04%
Total Network Discount	\$3,672,015	\$1,382,244	\$930,433	25.34%	100.00%
Out of Network	\$308,823	\$62,385		0%	0%
Total	\$3,980,838	\$1,444,629	\$930,433	23.37%	

Everyone Deserves a Healthy Smile

Member Benefits Summary

CENTRAL JERSEY HEALTH INSURANCE FUND - 03601

January 2021 - December 2021

Member Summary

Enrollment Summary	2020	2021	Percent Change	Book of Business
Average Number of Members	4,718	4,716	0.0%	
Average Number of Subscribers	2,073	2,097	1.2%	
Ratio of Members to Subscribers	2.3	2.2	-4.3%	2.1
Incurred Claims per Member by Class Of Service	2020	2021	Percent Change	Book of Business
Preventive and Diagnostic Services	\$116	\$135	16.5%	\$147
Basic Services	\$86	\$87	1.3%	\$98
Major Services	\$60	\$60	0.5%	\$52
Orthodontic Services	\$11	\$10	-8.0%	\$19
Total Services	\$273	\$293	7.2%	\$316
Incurred Procedures per Member by Class of Service	2020	2021	Percent Change	Book of Business
Preventive and Diagnostic Procedures	3.3	3.6	0.1%	3.6
Basic Procedures	0.8	0.8	0.1%	0.9
Major Procedures	0.2	0.2	0.1%	0.2
Orthodontic Procedures	0.0	0.0	0.0%	0.1
Total Procedures	4.3	4.7	10.2%	4.7

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Plan Maximum Utilization

All Networks

Plan Maximum	Plan Maximum Used	Members	Percent of Total Members
\$750	0%	3	10.3%
	1-20%	7	24.1%
	21-40%	11	37.9%
	41-60%	5	17.2%
	61-80%	1	3.4%
	100%	2	6.9%
	Members with paid claims:	29	100.0%
Plan Maximum	Plan Maximum Used	Members	Percent of Total Members
\$1,000	0%	13	1.1%
	1-20%	360	29.7%
	21-40%	368	30.3%
	41-60%	155	12.8%
	61-80%	101	8.3%
	81-99%	50	4.1%
	100%	167	13.8%
	Members with paid claims:	1,214	100.0%
Plan Maximum	Plan Maximum Used	Members	Percent of Total Members
\$1,300	1-20%	12	85.7%
	41-60%	2	14.3%
	Members with paid claims:	14	100.0%

Everyone Deserves a Healthy Smile

Member Benefits Summary

CENTRAL JERSEY HEALTH INSURANCE FUND - 03601

January 2021 - December 2021

Plan Maximum	Plan Maximum Used	Members	Percent of Total Members
\$1,500	0%	6	1.5%
	1-20%	198	49.6%
	21-40%	109	27.3%
	41-60%	35	8.8%
	61-80%	17	4.3%
	81-99%	17	4.3%
	100%	17	4.3%
	Members with paid claims:	399	100.0%
Plan Maximum	Plan Maximum Used	Members	Percent of Total Members
\$2,000	0%	3	1.4%
	1-20%	145	69.7%
	21-40%	28	13.5%
	41-60%	13	6.3%
	61-80%	6	2.9%
	81-99%	4	1.9%
	100%	9	4.3%
	Members with paid claims:	208	100.0%
Plan Maximum	Plan Maximum Used	Members	Percent of Total Members
\$2,500	1-20%	63	64.9%
	21-40%	16	16.5%
	41-60%	5	5.2%
	61-80%	7	7.2%
	81-99%	2	2.1%
	100%	4	4.1%
	Members with paid claims:	97	100.0%

Everyone Deserves a Healthy Smile

Member Benefits Summary

CENTRAL JERSEY HEALTH INSURANCE FUND - 03601

January 2021 - December 2021

Plan Maximum	Plan Maximum Used	Members	Percent of Total Members
\$3,000	1-20%	92	84.4%
	21-40%	12	11.0%
	41-60%	2	1.8%
	61-80%	1	0.9%
	81-99%	2	1.8%
	Members with paid claims:	109	100.0%
Plan Maximum	Plan Maximum Used	Members	Percent of Total Members
\$1,000,000	0%	10	2.1%
	1-20%	468	97.9%
	Members with paid claims:	478	100.0%
		2,548	100.0%

Members counted in a \$1,000,000 plan maximum may be duplicated in other plan maximum member counts.

FFS + ADV + Out of Network

Plan Maximum	Plan Maximum Used	Members	Percent of Total Members
\$2,000	1-20%	21	80.8%
	21-40%	1	3.8%
	41-60%	2	7.7%
	61-80%	1	3.8%
	100%	1	3.8%
	Members with paid claims:	26	100.0%
		26	100.0%

Members counted in a \$1,000,000 plan maximum may be duplicated in other plan maximum member counts.

PPO + Out of Service

Plan Maximum	Plan Maximum Used	Members	Percent of Total Members
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Everyone Deserves a Healthy Smile

Member Benefits Summary

CENTRAL JERSEY HEALTH INSURANCE FUND - 03601

January 2021 - December 2021

\$3,000	1-20%	17	68.0%
	21-40%	4	16.0%
	41-60%	1	4.0%
	61-80%	3	12.0%
	Members with paid claims:	25	100.0%
		25	100.0%

Members counted in a \$1,000,000 plan maximum may be duplicated in other plan maximum member counts.

Everyone Deserves a Healthy Smile

CENTRAL JERSEY HEALTH INSURANCE FUND
CONSENT AGENDA
May 18, 2022

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 17-22: 2021 Audit Approval	Page 48
Resolution 18-22: Closing of Fund Year 2020	Page 51
Resolution 19-22: Lakewood Dividend Approval	Page 52
Revised Resolution 13-22: Adopting 2022 Wellness Grant Programs.....	Page 53
Resolution 18-22: Approval of the March, April & May 2022 Bills Lists	Page 54

RESOLUTION NO 17-22

**CENTRAL JERSEY EMPLOYEE BENEFITS FUND
CERTIFICATION OF ANNUAL AUDIT REPORT FOR
PERIOD ENDING DECEMBER 31, 2021**

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

WHEREAS, the Annual Report of Audit for the year 2021 has been filed by the appointed Fund Auditor with the Secretary of the Fund as per the requirements of N.J.S.A. 40A:5-6 and N.J.S.A. 40A:10-36, and a copy has been received by each Fund Commissioner, and

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

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

General Comments
and
Recommendations

and

WHEREAS, the Fund Commissioners have personally reviewed, as a minimum, the Annual Report of Audit, and specifically the sections of the Annual Audit entitled:

General Comments
and
Recommendations

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

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

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

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

R.S. 52:27BB-52 - "A local officer or member of a local governing body who, after a date fixed for compliance, fails or refuses to obey an order of the director (Director of Local Government Services), under the provisions of this Article, shall be guilty of a misdemeanor and, upon conviction, may be fined not more than one thousand dollars (\$1,000.00) or imprisoned for not more than one year, or both, in addition shall forfeit his office."

NOW, THEREFORE, BE IT RESOLVED, that the Executive Committee hereby states that they have complied with the promulgation of the Local Finance Board of the State of New Jersey, dated July 30, 1968, and does hereby submit a certified copy of this resolution and the required affidavit to said Board to show evidence of said compliance.

ADOPTED: May 18, 2022

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

GROUP AFFIDAVIT FORM
CERTIFICATION OF FUND COMMISSIONERS
Of the
CENTRAL JERSEY HEALTH INSURANCE FUND

We the Fund Commissioners of the Central Jersey Health Insurance Fund, of full age, being duly sworn according to law, upon our oath depose and say:

1.) We are duly elected members Fund Commissioners of the Central Jersey Health Insurance Fund.

2.) In the performance of our duties, and pursuant to the Local Finance Board Regulation, we have familiarized ourselves with the contents of the Annual Fund Audit filed with the Secretary of the Fund pursuant to N.J.S.A. 40A:5-6 and N.J.S.A. 40A:10-36 for the year 2021.

3.) We certify that we have personally reviewed and are familiar with, as a minimum, the sections of the Annual Report of Audit entitled:

GENERAL COMMENTS - RECOMMENDATIONS

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

Attest:

Secretary to the Fund

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

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

RESOLUTION NO. 18-22

**CENTRAL JERSEY HEALTH INSURANCE FUND
APPROVAL TO CLOSE FUND YEAR 2020**

WHEREAS, the **Central Jersey Health Insurance Fund** held a Public Meeting on **May 18, 2022** for the purposes of conducting the official business of the Fund; and

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

WHEREAS, the Annual Report of Audit for the year 2020 has been filed by the appointed Fund Auditor with the Secretary of the Fund as per the requirements of N.J.S.A. 40A:5-6 and N.J.S.A. 40A:10-36, and a copy has been received by each Fund Commissioner, and

WHEREAS, the Fund Treasurer confirmed that the Fund outstanding receivables and payables of Fund Year 2020 have been satisfied;

NOW THEREFORE BE IT RESOLVED the of the Central Jersey Health Insurance Fund hereby close Fund Year 2020 into its Closed Year Accounting.

ADOPTED: May 18, 2022

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

RESOLUTION NO. 19-22

**RESOLUTION AUTHORIZING REFUND FROM
THE LAKEWOOD 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 retains a separate closed year accounting for the Township of Lakewood from the remaining members and the Actuary and Executive Director have determined that the Township of Lakewood has sufficient surplus in its closed year;

WHEREAS, the Fund Commissioners have determined that it would be in the best interest of the FUND and Lakewood to make certain refunds;

NOW, THEREFORE, BE IT RESOLVED by the Fund Commissioners of the Central Jersey Health Insurance Fund, as follows:

1. Section B of N.J.A.C. 11:15-2.21 provides that the FUND may seek approval for refunds from any claim fund which has been completed for not less than twenty-four months. Based upon this requirement, surplus monies in closed fund years are eligible for refunds at the discretion of the FUND, the Department of Banking and Insurance and the Department of Community Affairs.

2. The Fund Commissioners have balanced the interests of the Township of Lakewood 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. It is the conclusion of the Executive Committee that the following amount can be refunded at this time:

\$2,800,000 Closed Years

4. 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.

5. The FUND Treasurer is authorized to prepare and execute a check for the pro-rated amount of the aforementioned refunds due to the Township of Lakewood for the year in question, provided, however, the FUND Treasurer shall deduct any outstanding 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 were assessed for the years in question.

ADOPTED:

BY: _____
Chairman

ATTEST: _____
Secretary

RESOLUTION NO. 13-22

**CENTRAL JERSEY HEALTH INSURANCE FUND
ADOPTING 2022 WELLNESS GRANT PROGRAMS**

WHEREAS, the Central Jersey Health Insurance Fund is duly constituted as a Health Benefits Joint Insurance Fund and is subject to certain requirements of the Local Public Contracts Law; and;

WHEREAS, the Commissioners set forth a budget for the Central Jersey Health Insurance Fund members for the year of January 1, 2022 through December 31, 2022. This budget includes \$125,000 for individual member wellness grants;

WHEREAS, the Central Jersey Health Insurance Fund Executive Committee requested grant applications from Fund members which were received and reviewed by the Committee and deemed appropriate and within budget;

Group Name	Biometric Screenings (option 1)	Option 2 (Tavi Challenges)	Option 3 (Wellness Days)	Option 4 (EAP)	Option 5 - Build own	Wellness Champion Stipend	Total	Notes
Montgomery Twp					X	\$1,000.00	\$9,460.00	Wellness Platform through Wellable; Biometric Screening; Farm Share; Challenges; Wellness Fair
Lakewood Twp						\$1,500.00	\$15,500.00	Health Challenges and Wellnes Fair
Total Request for May approval							\$9,460.00	

WHEREAS, on May 18, 2022, the Commissioners of Central Jersey Health Insurance Fund approved Wellness Grant Programs totaling \$9,460.00 which is in addition to a previous approval of \$ \$50,722.50 in grant programs.

CENTRAL JERSEY HEALTH INSURANCE FUND

ADOPTED: MAY 18, 2022

BY: _____

CHAIRPERSON

ATTEST:

SECRETARY

RESOLUTION NO. 20-22

**CENTRAL JERSEY HEALTH INSURANCE FUND
APPROVAL OF THE MARCH, APRIL AND MAY BILLS LISTS**

WHEREAS, the Central Jersey Health Insurance Fund held a Public Meeting on **May 18, 2022** 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 February 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 March 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 March, April and May 2022 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.

ADOPTED: May 18, 2022

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

APPENDIX I

CENTRAL JERSEY HEALTH INSURANCE FUND
OPEN MINUTES
March 16, 2022
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 2022 EXECUTIVE COMMITTEE

Thomas Nolan	Chair – Borough of Brielle	Present
Brian Brach	Secretary– Manasquan RRSA	Present
Diane Lapp	Executive Committee – Township of Manchester	Absent
Donato Nieman	Executive Committee – Montgomery Township	Present
Brian Valentino	Executive Committee– Western Monmouth MUA	Present
Brian Dempsey	Executive Committee – Spring Lake Borough	Present
Peter O'Reilly	Executive Committee – Borough of Lakewood	Present
Louis Amoruso	Executive Committee Alternate – Toms River	Absent
Angela Morin	Executive Committee Alternate – Aberdeen	Present

APPOINTED OFFICIALS PRESENT:

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

OTHERS PRESENT:

Anthony Tonzini
Barbara Ilaria - Manasquan
Christine Lyons
Danskin
Diane Peterson

Englishtown Borough
Jacque Maddren
John Lajewski
Mike Zangrilli
Robert Ferragina - Atlantic Highlands

APPROVAL OF MINUTES: January 19, 2022 OPEN:

MOTION TO APPROVE OPEN MINUTES OF January 19, 2022

MOTION:	Commissioner Nieman
SECOND:	Commissioner Valentino
VOTE:	All in Favor

CORRESPONDENCE: None

EXECUTIVE DIRECTOR'S REPORT

AETNA CLAIMS PROCESSING SLOW DOWN -Executive Director Lodics said that during the Schools HIF Budget development process, the Fund Actuary discovered that Aetna's claim turnaround time is slower than what the Fund had experienced historically but still withing industry standards and within the commitments of their contractual performance guarantees. Aetna has advised that the claims processing slowdown began in July 1, 2021.

Executive Director explained what IBNR is. He said that the Fund holds this reserve for claims that are happening, just haven't hit the Fund bank account. The liability is required by statute. He said that because of this slow down, the monthly IBNR amount reserved was understated. Executive Director said that PERMA is a little disappointed that this was not notified earlier. Aetna advised that it is a staffing issue and are addressing it with the Fund accounts. Unfortunately, this is an issue across all self insured groups. He explained the good news for the CJHIF is that the 2022 budget was developed based on claims through June 31, 2021 and that period was not impacted by the slow down. The close of 2021 was still 4% below budget even with that slowdown impact. Aetna is staying with the performance guarantee standards set in the fund contract. In comparison to previous years, claim processing turn around times were much faster, of which the Fund depended on for the monthly IBNR reserve. The SHIF actuary will be doing quarterly reviews to make sure we catch up. Aetna is adding resources and making every effort to correct this by the beginning of the 3rd quarter. In response to Chairman Nolan, Mr. Lodics reviewed the Financials through January and stated that from a cash standpoint there is no concern because the surplus is still cash positive at \$15.5 Million which is about 5 months worth of claims. The Fund should not find itself in any kind of deficit or cash concerning position.

2022 WELLNESS GRANT APPLICATIONS

Ms. Koval stated that they had decided to extend the application deadline to March 1st since there were only a few members who decided to participate. Since then, we have received other applications from Brielle, Plumstead, Aberdeen and Atlantic Highlands. There is a summary included below. The

committee is willing to look at other applications. It looks like there is about \$75,000 left in the grant budget so if anyone is interested, please reach out.

Group Name	Biometric Screenings (option 1)	Option 2 (Tavi Challenges)	Option 3 (Wellness Days)	Option 4 (EAP)	Option 5 - Build own	Wellness Champion Stipend	Total	Notes
Oceanport				X		\$0.00	\$3,780.00	Preferred Behavior EHP plan for all employees; ALREADY APPROVED
Bedminster		X			X	\$0.00	\$6,500.00	Tavi challenges and Health Lunch Kickoff; ALREADY APPROVED
Highlands BOE					X	\$0.00	\$2,500.00	Wellness Bingo Challenges, Chair Massages, Acupuncture; body composition testing; ALREADY APPROVED
Brielle Township					X	\$500.00	\$5,911.00	Fall Flu Shot Clinic; motivational speaker; walking challenges and incentives
Plumsted					X	\$500.00	\$3,167.50	Fall Flu Shot Clinic thru Health Fairs Direct; walking challenges and prizes
Aberdeen					X	\$2,100.00	\$19,314.00	Healthy Lunch; gym challenges; 5K runs; Mayors cup softball; pedometers; yoga, tai chi; stand up tops for desks, peddle desk/sitting balls
Atlantic Highlands					X	\$0.00	\$9,550.00	Medication review, glucose/AC1 hcecks at local pharmacy; local doc for blood pressure and bone density; gym memberships; incentives
Totals							\$50,722.50	
Remainder available for Grants							\$74,277.50	
Total Request for March approval							\$37,942.50	

Mrs. Koval reviewed the following informational portion of the report:

REVISED RESOLUTION 10-22

Resolution 10-22 has been corrected to include risk managers and fees that were inadvertently left off the January resolution.

MUNICIPAL REINSURANCE HEALTH INSURANCE FUND

The MRHIF executive committee met on February 9 to reorganize for 2022. Besides reorg, there were no major action items. The Fund will continue its 3 year TPA audit cycle which this year will focus on Delta Dental.

GASB 75 REPORTS

The Fund contracts with an Actuary to provide GASB 75 reports on behalf of its medical members. Please reach out to Emily Koval if your audit requires a full report or update to last year's report. During its 'busy' season, reports can take up to 4 weeks to turn around.

2022 MEL/MRHIF EDUCATIONAL SEMINAR

The 11th annual seminar will be conducted virtually on 2 half day sessions: Friday, April 29th and Friday, May 6th from 9 am to 12 noon. There is no fee for employees and insurance producers associated with MEL and Municipal Reinsurance Health Insurance Fund (MR HIF) members as well as personnel who work for service companies that are engaged by MEL member JIFs and MR HIF member HIFs. Attached a copy of the ad which will appear in the League of Municipalities "Power of Collaboration". The seminar qualifies for Continuing Educational Credits for designated positions as outlined within the ad. Registration will be posted to the MEL website at www.njmel.org.

Program Manager's Report

Program Manager Crystal Bailey reviewed the agenda reports.

COVERAGE UPDATES:

Ms. Bailey stated that there are no new updated and just as a reminder, she mentioned in the last meeting there that the FDA has approved 2 oral antiviral medications for Emergency Use Authorizations and the information on those are included in the agenda.

OPERATIONAL UPDATES:

Delta Dental - 7/1/22

Ms. Bailey stated that we are recommending HIF groups with Delta Dental PPO plans with preventative exams frequencies other than 2 times per calendar year change the frequency to 2 times per calendar year. This will avoid claims being denied when a visit is made within the same calendar year sooner than six months from the last exam. Please note this does not apply to groups with Flagship DHMO and/or DeltaCare USA plans as they are state filed plans and cannot be altered. Currently CJHIF has 14 groups that have a preventive exam frequency other than 2 times per calendar year under their PPO dental plan.

Program Manager recommends the change be effective 7/1/22.

2022 LEGISLATIVE REVIEW

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

4. National Emergency Declaration- Extended through April 15, 2022
5. At Home COVID-19 Testing- On January 10th, the Biden Administration issued a mandate that takes effects on January 15, 2022, requiring the coverage of At Home/Over the Counter COVID-19 test kits by Employer sponsored health plans. As outlined in the communication sent on January 14, 2022, the HIF will cover the kits under the pharmacy plan (ESI). For groups contracted outside of HIF for their pharmacy benefit, the group should contact their PBM or broker to implement a coverage solution.

Coverage Highlights:

- o Date- Starting on January 15, 2022, going forward
- o Network - the legislation encourages healthcare insurers to develop a network of locations at which the tests can be purchased with \$0 member cost share at point of service
- o Dollar Limit- Up to \$12 per taste
- o Quantity Limit- Up to 8 tests per individual per 30 days

FREE Tests from the Government

Starting Tuesday, January 19th, anyone can go to the web site and arrange to have four (4) kits mailed to their home at no cost. The web site is <https://www.COVIDTests.gov>. For those that may not have internet access, there is a toll-free number available to request tests, 800-232-0233 (TTY 888-720-7489). The White House says tests will begin to get shipped within seven days from ordering. Access to free tests should help relieve employers and plan sponsors from absorbing these additional testing costs.

ESI Highlights:

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

6. Vaccine Mandates – November 4, 2021, OSHA released the *Emergency Temporary Standard*. Which implemented a “vaccine or test,” requirement for Employers over 100 Employees. The Mandate is still not in effect as it has gone through multiple State and Federal Court appeals. Most recently, on January 13, 2022, the US Supreme Court blocked the enforcement of vaccine or testing mandate for businesses with at least 100 employees.

As a reminder testing as an occupational requirement are not covered under Employer Health Plans.

Mental Health Parity and Addiction Equality Act (MHPAE)

Ms. Bailey stated that nothing has changed since the last meeting but they are watching this very closely so as soon as they receive additional information, they will let everyone know.

Surprise Billing and Transparency – Continued Delays

Ms. Bailey stated that they are continuing to work with the insurance providers to assure the CJHIF remains compliant. The carrier has made some adjustments to ID cards and providing transparency tools as clients come into the HIFS or change plans.

TREASURER – Fund Treasurer Steve Mayer reviewed the two bills lists for January and February 2022. He stated that approval is in the consent agenda.

ATTORNEY: Mr. Sahradnik stated he has nothing to report.

AETNA: Mr. Silverstein made a brief statement about the Aetna Slow Down that Mr. Lodics mentioned earlier. He apologized to the Fund for not being proactive and that they are making the necessary changes to enhance their performance. Mr. Silverstein reviewed the claims for December 2021 and January 2022. Mr. Silverstein stated there were 6 high cost claimants for December over the

threshold of \$50,000 and 6 for January 2022. He also reviewed the dashboard report including the new report that they imported. He reviewed the weekly and monthly covid reporting included with the agenda.

EXPRESS SCRIPTS: Mike Stahl reviewed the claims for January 2022. The total claims are \$643,651 this brought a 23% increase from January 2021. The increase was a result of specialty claims increasing. They will continue to watch this closely.

DELTA DENTAL: Mr. Remlinger reviewed the Network Utilization report for the months of January 2021 – December 2021. This report shows that people are utilizing the in-network which is very good.

AMERIHEALTH: Kristina Strain reviewed the claims for February 2022. There were no high claimants for the month of February. She reviewed the covid reporting included in agenda stating the numbers are still very consistent from what we've been seeing in the last couple of months.

MOTION TO APPROVE THE CONSENT AGENDA WHICH INCLUDES THE FOLLOWING:

Resolution 10-22 Broker Contract Approval
Resolution 13-22 Adopting 2022 Wellness grant Programs
Resolution 15-22 Approval of the February 2022 Bills List
Resolution 16-22 Change of Dental Plan Benefit

MOTION:	Commissioner Valentino
SECOND:	Commissioner Nieman
ROLL CALL:	7 Ays, 0 Days

OLD BUSINESS: None

NEW BUSINESS: None

PUBLIC COMMENT: None

MOTION TO ADJOURN MEETING:

MOTION:	Commissioner Nieman
SECOND:	Commissioner Valentino
VOTE:	All in Favor

MEETING ADJOURNED: 2:30 pm

Minutes Prepared by: Jordyn DeLorenzo , Assisting Secretary

Next Meeting: May 18, 2022 1:30 pm, Zoom Meeting