



AGENDA AND REPORTS

JULY 17, 2024

1:30 PM

ZOOM

Join Zoom Meeting

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STATEMENT OF COMPLIANCE WITH OPEN PUBLIC MEETINGS ACT

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: JULY 17, 2024
1:30 PM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

FLAG SALUTE

ROLL CALL OF 2024 EXECUTIVE COMMITTEE

Thomas Nolan, Chair – Borough of Brielle
Brian Brach, Secretary– Manasquan RRSA
Diane Lapp, Executive Committee – Township of Manchester
Brian Valentino, Executive Committee– Western Monmouth MUA
Brian Dempsey, Executive Committee – Spring Lake Borough
Peter O'Reilly, Executive Committee – Borough of Lakewood
Angela Morin, Executive Committee – Aberdeen
James Gant, Executive Committee Alternate – Red Bank

APPROVAL OF MINUTES: May 15, 2024 Open: Appendix I

CORRESPONDENCE – Out of Network Memo

REPORTS:

EXECUTIVE DIRECTOR (PERMA)

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PROGRAM MANAGER– (Conner Strong & Buckelew)

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TREASURER – (Stephen Mayer)

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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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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
July 17, 2024

FINANCE AND CONTRACTS

PRO FORMA REPORTS

- **Fast Track Financial Report** – as of April 30, 2024 (page 4)

OUT OF NETWORK MEMO

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

We will discuss further at the meeting.

HIF COOPERATIVE PRICING SYSTEM

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

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

MEMBER TERMINATIONS

Highlands School District was a dental only member that left on July 1, 2024. The BOE joined a few other local districts to purchase dental insurance. The Fund was given the opportunity to quote but was not competitive.

Toms River Township has submitted their resolution to exit the HIF. Their resolution was passed on June 26, 2024. Their coverage will be terminating on September 30, 2024.

MRHIF MEETING

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

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

PCORI AND A4 SURCHARGE FEES

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

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

In addition, all School Board members that are not in the State Health Benefits Fund are surcharged for retiree benefits. The Fund has one School Board that the Fund will pay this fee in July on its behalf, which was included in its rates upon joining the Fund.

2024 WELLNESS GRANT APPLICATIONS

Aberdeen has submitted for a wellness grant again this year prior to the due date. The items will be similar to prior years with some additional approved expenses.

Group Name	Biometric Screenings (option 1)	Option 2 (Wellness Days)	Option 3 (Build Own)	Amount Requested	Wellness Champion Stipend	Total	Notes
Oceanport			X	\$3,780.00		\$3,780.00	Preferred Behavior EHP plan for all employees;
Atlantic Highlands			X			\$9,850.00	Medication Review by local pharmacy; blood glucose and A1C checks; Gym memberships
Montgomery Township			X	\$9,760.00		\$9,760.00	Wellworks challenges, biometric screenings, wellness based education
Lakewood Township			X	\$15,500.00	\$1,500.00	\$17,000.00	Challenge, Wellness Workshops, Fair, Wellbeing initiatives
Brielle Borough			X		\$1,100.00	\$6,000.00	Water and Walk Challenge
Bedminster			X			\$7,500.00	Kickball Tournament with healthy lunch, step challenges by Terryberry with prizes
MCBOA			X			\$2,640.00	Step Challenges and Gym reimbursements
Aberdeen					\$700.00	\$24,885.00	healthy luncheon kickoff, various gym and 5k runs challenges, farm fresh program, introducing Wellable challenge this year and a health fair in the fall. Looking to incorporate biometric screening this year, and additional equipment for the gym
Totals						\$81,415.00	
Remainder available for Grants						\$68,585.00	

BUDGET UPDATE

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

INDEMNITY AND TRUST AGREEMENTS

PERMA sent Indemnity and Trust Agreements and Resolutions to be adopted by the governing bodies to renew membership with the Fund for an additional 3 years. Below is a list of members who have renewing agreements have expired. Please reach out to hifadmin@permainc.com for a blank form to be executed. The list was last updated on May 6, 2024.

Member	I&T end date
Shrewsbury Township	12/31/2021
Keyport	12/31/2022
Borough of Sayreville	12/31/2023
Spring Lake	12/31/2023
Highland Elementary School	12/31/2023
Matawan	12/31/2023
Bedminster Township	12/31/2023

CENTRAL JERSEY HEALTH INSURANCE FUND						
FINANCIAL FAST TRACK REPORT						
		AS OF	April 30, 2024			
		THIS MONTH	YTD CHANGE	PRIOR YEAR END	FUND BALANCE	
UNDERWRITING INCOME		5,481,171	22,077,104	905,698,054	927,775,158	
CLAIM EXPENSES						
	Paid Claims	5,733,064	20,320,708	739,807,037	760,127,746	
	IBNR	(20,675)	(278,581)	5,115,122	4,836,541	
	Less Specific Excess	-	196,666	(20,773,569)	(20,576,903)	
	Less Aggregate Excess	-	-	(1,000,000)	(1,000,000)	
TOTAL CLAIMS		5,712,389	20,238,793	723,148,590	743,387,383	
EXPENSES						
	MA & HMO Premiums	328,977	1,309,403	28,314,822	29,624,225	
	Excess Premiums	204,939	815,516	41,013,751	41,829,267	
	Administrative	331,216	1,300,694	52,865,142	54,165,836	
TOTAL EXPENSES		865,131	3,425,614	122,193,715	125,619,328	
UNDERWRITING PROFIT/(LOSS) (1-2-3)		(1,096,350)	(1,587,303)	60,355,749	58,768,447	
INVESTMENT INCOME		20,803	91,880	4,062,357	4,154,237	
DIVIDEND INCOME		0	0	8,232,890	8,232,890	
STATUTORY PROFIT/(LOSS) (4+5+6)		(1,075,547)	(1,495,423)	72,650,997	71,155,574	
DIVIDEND		11,306	11,309	60,992,652	61,003,962	
Transferred Surplus		0	0		0	
STATUTORY SURPLUS (7-8+9)		(1,086,853)	(1,506,732)	11,658,344	10,151,612	
SURPLUS (DEFICITS) BY FUND YEAR						
Closed	Surplus	(974)	40,180	7,194,936	7,235,116	
	Cash	8,424	37,458	7,363,134	7,400,592	
2022	Surplus	(2,829)	(37,259)	2,824,242	2,786,983	
	Cash	407	53,829	2,345,170	2,398,999	
2023	Surplus	32,734	(138,445)	(2,005,117)	(2,143,563)	
	Cash	402,042	(515,211)	(2,273,292)	(2,788,503)	
LAKEWOOD	Surplus	(202,292)	251,220	3,644,283	3,895,503	
	Cash	4,320,699	1,399,523	2,921,176	4,320,699	
2024	Surplus	(913,492)	(1,622,428)		(1,622,428)	
	Cash	(287,966)	(1,365,872)		(1,365,872)	
TAL SURPLUS (DEFICITS)		(1,086,853)	(1,506,732)	11,658,344	10,151,612	
TAL CASH		4,443,605	(390,274)	10,356,188	9,965,914	
CLAIM ANALYSIS BY FUND YEAR						
TOTAL CLOSED YEAR CLAIMS		(408)	(7,660)	567,815,469	567,807,808	
FUND YEAR 2022						
	Paid Claims	6,272	50,317	34,755,654	34,805,971	
	IBNR	0	0		0	
	Less Specific Excess	0	2,066	(712,448)	(710,382)	
	Less Aggregate Excess	0	0	0	0	
TOTAL FY 2022 CLAIMS		6,272	52,383	34,043,206	34,095,589	
FUND YEAR 2023						
	Paid Claims	155,527	3,293,916	36,837,212	40,131,127	
	IBNR	(186,842)	(3,363,156)	3,736,839	373,683	
	Less Specific Excess	0	239,038	(1,076,325)	(837,287)	
	Less Aggregate Excess	0	0	0	0	
TOTAL FY 2023 CLAIMS		(31,315)	169,798	39,497,726	39,667,523	
LAKEWOOD						
	Paid Claims	1,575,564	5,245,246	83,685,305	88,930,551	
	IBNR	15,021	52,558	1,378,283	1,430,841	
	Less Specific Excess	0	(44,438)	(3,271,400)	(3,315,838)	
	Less Aggregate Excess	0	0	0	0	
TOTAL LAKEWOOD CLAIMS		1,590,585	5,253,366	81,792,188	87,045,554	
FUND YEAR 2024						
	Paid Claims	3,996,109	11,738,890		11,738,890	
	IBNR	151,146	3,032,016		3,032,016	
	Less Specific Excess	0	0		0	
	Less Aggregate Excess	0	0		0	
TOTAL FY 2024 CLAIMS		4,147,256	14,770,906		14,770,906	
MBINED TOTAL CLAIMS		5,712,389	20,238,793	723,148,589	743,387,381	

CENTRAL JERSEY HEALTH INSURANCE FUND					
RATIOS					
		FY2024			
INDICES	2023	JAN	FEB	MAR	APR
Cash Position	10,356,188	\$ 10,516,008	\$ 7,679,861	\$ 8,917,778	\$ 9,965,914
IBNR	5,115,122	\$ 5,140,768	\$ 4,859,277	\$ 4,857,216	\$ 4,836,541
Assets	17,211,717	\$ 17,268,892	\$ 16,497,944	\$ 16,371,132	\$ 15,267,869
Liabilities	5,553,378	\$ 5,443,977	\$ 5,114,472	\$ 5,132,672	\$ 5,116,262
Surplus	11,658,339	\$ 11,824,915	\$ 11,383,472	\$ 11,238,460	\$ 10,151,607
Claims Paid -- Month	3,380,832	\$ 4,487,765	\$ 5,424,875	\$ 4,678,869	\$ 5,734,313
Claims Budget -- Month	4,316,828	\$ 4,597,439	\$ 4,610,933	\$ 4,601,523	\$ 4,597,772
Claims Paid -- YTD	54,737,597	\$ 4,487,765	\$ 9,912,641	\$ 14,591,509	\$ 20,325,822
Claims Budget -- YTD	51,088,206	\$ 4,597,439	\$ 9,208,372	\$ 13,809,895	\$ 18,407,667
RATIOS					
Cash Position to Claims Paid	3.06	2.34	1.42	1.91	1.74
Claims Paid to Claims Budget -- Month	0.78	0.98	1.18	1.02	1.25
Claims Paid to Claims Budget -- YTD	1.07	0.98	1.08	1.06	1.1
Cash Position to IBNR	2.02	2.05	1.58	1.84	2.06
Assets to Liabilities	3.10	3.17	3.23	3.19	2.98
Surplus as Months of Claims	2.70	2.57	2.47	2.44	2.21
IBNR to Claims Budget -- Month	1.18	1.12	1.05	1.06	1.05

Central Jersey Health Insurance Fund

2024 Budget Report

AS OF APRIL 30, 2024

				Cumulative	\$ Variance	% Variance
Expected Losses	Cumulative	Annual	Latest Filed	Expensed		
Medical Claims AmeriHealth 12/31 Rene	6,908	20,724	10,548			
Medical Claims AmeriHealth 6/30 Renew	124,956	366,128	364,772			
Medical Claims Aetna 12/31 Renewal	10,378,548	32,311,568	31,197,461			
Medical Claims Aetna 6/30 Renewal	129,724	403,662	391,193			
Subtotal Medical Claims	10,640,136	33,102,082	31,963,974	11,873,276	(1,221,464)	-11%
Prescription Claims 12/31 Renewal	2,150,555	6,681,026	6,384,135			
Prescription Claims 6/30 Renewal	49,531	151,156	158,420			
Less Rx Rebates	(660,026)	(2,049,654)	(1,962,767)			
Subtotal Prescription Claims	1,540,060	4,782,528	4,579,788	2,345,462	(805,402)	-52%
Dental Claims 12/31 Renewal	627,566	1,887,628	1,823,910			
Dental Claims 6/30 Renewal	0	0	19,042			
Subtotal Dental Claims	627,566	1,887,628	1,842,952	552,168	75,398	12%
Vision Claims	11,676	35,731	28,659	Included in Medical Claims		
Lakewood SIR Claims						
Medical	4,218,702	12,672,306	11,637,090	4,273,536	(54,834)	-1%
Prescription	1,369,527	4,122,942	3,875,960	979,830	389,697	28%
Subtotal Claims	18,407,667	56,603,217	53,928,423	20,024,272	(1,616,605)	-9%
Medicare Advantage / EGWP	1,120,736	3,454,212	3,388,905	1,307,730	27,179	2%
Medicare Advantage - Rx	214,174	644,727	648,588	Included in Medicare Advantage / EGWP		
DMO Premiums	1,390	4,102	6,749	1,673	(283)	-20%
Reinsurance						
Specific	379,015	1,183,036	1,130,121			
Lakewood - ICH	436,952	1,318,717	1,415,697			
Subtotal Reinsurance	815,967	2,501,753	2,545,818	815,516	450	0%
Loss Fund Contingency	95,817	287,451	287,451	0	95,817	100%
Total Loss Fund	20,655,750	63,495,461	60,805,934	22,149,192	(1,493,441)	-7%
Expenses						
Legal	12,144	36,432	36,432	12,144	-	0%
Treasurer	4,333	13,000	13,000	4,332	1	0%
Administrator	177,510	542,441	530,150	177,538	(28)	0%
Program Manager	662,438	2,014,720	1,976,094	667,438	-	0%
Actuary	5,633	16,900	16,900	5,634	(1)	0%
Auditor	7,000	21,000	21,000	7,000	-	0%
TPA - Aetna	347,233	1,076,151	1,082,664	350,076	328	0%
TPA - AmeriHealth	3,171	8,919	9,989	Included above in TPA - Aetna		
Plan Documents	5,000	15,000	15,000	Included in Program Manager		
Dental TPA	27,909	84,148	82,725	27,926	(17)	0%
Wellness	50,000	150,000	150,000	50,000	-	0%
Affordable Care Act	4,378	13,558	13,015	4,375	3	0%
A4 Retiree Surcharge	5,113	15,482	15,699	5,114	(1)	0%
Claims Audit	13,333	40,000	40,000	13,333	0	0%
Misc/Cont	7,062	21,185	21,185	1,760	5,301	75%
Total Expenses	1,332,259	4,068,936	4,023,853	1,326,671	5,588	0%
Total Budget	21,988,009	67,564,397	64,829,787	23,475,862	(1,487,853)	-7%

Central Jersey Health Insurance Fund

CONSOLIDATED BALANCE SHEET

AS OF APRIL 30, 2024

BY FUND YEAR

	CJ HIF 2024	CJ HIF 2023	CJ HIF 2022	CLOSED YEAR	LAKEWOOD	FUND BALANCE
ASSETS						
Cash & Cash Equivalents	(1,365,872)	(2,788,503)	2,398,999	7,400,592	4,320,699	9,965,914
Assessments Receivable (Prepaid)	2,168,501	102,372	388,851	1,983	4,094	2,665,801
Interest Receivable	23	465	1,199	3,560	2,081	7,327
Specific Excess Receivable	-	837,287	(2,066)	-	594,287	1,429,508
Aggregate Excess Receivable	-	-	-	-	-	-
Dividend Receivable	-	-	-	-	-	-
Prepaid Admin Fees	2,816	-	-	-	-	2,816
Other Assets	683,943	107,376	-	-	405,184	1,196,502
Total Assets	1,489,411	(1,741,005)	2,786,983	7,406,135	5,326,345	15,267,869
LIABILITIES						
Accounts Payable	-	0	-	-	-	0
IBNR Reserve	3,032,016	373,683	-	-	1,430,841	4,836,541
A4 Retiree Surcharge	5,114	13,375	-	-	-	18,489
Dividends Payable	-	-	-	(0)	-	(0)
Retained Dividends	-	-	-	171,024	-	171,024
Accrued/Other Liabilities	74,708	15,500	-	-	-	90,208
Total Liabilities	3,111,838	402,558	-	171,024	1,430,841	5,116,262
EQUITY						
Surplus / (Deficit)	(1,622,428)	(2,143,563)	2,786,983	7,235,111	3,895,503	10,151,607
Total Equity	(1,622,428)	(2,143,563)	2,786,983	7,235,111	3,895,503	10,151,607
Total Liabilities & Equity	1,489,411	(1,741,005)	2,786,983	7,406,135	5,326,345	15,267,869
BALANCE	-	-	-	-	-	-

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



To: Commissioners, Hi Funds

CC: Broker Risk Managers, Hi Funds

From: PERMA Risk Management Services, Executive Director

Date: July 11, 2024

Subject: Wellness and Screening Vendors – NETWORK STATUS

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

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

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

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

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

HOW TO FIND IN-NETWORK PROVIDERS



TO FIND PARTICIPATING AETNA PROVIDERS:

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

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

TO FIND PARTICIPATING AMERIHEALTH ADMINISTRATORS PROVIDERS:

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



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

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

CENTRAL JERSEY HEALTH INSURANCE FUND
YEAR: 2024

<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	Filed
Annual Audit	12/31/2022 filed
Budget Changes	N/A
Transfers	N/A
Additional Assessments	N/A
Professional Changes	N/A
Officer Changes	Filed
RMP Changes	N/A
Bylaw Amendments	N/A
Contracts	Filed
Benefit Changes	N/A

CENTRAL JERSEY REGIONAL HEALTH INSURANCE FUND

Program Manager

July 2024

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.

System training (new and refresher) is provided to all contacts with WEX access **every 3rd Wednesday at 10AM**. Please contact HIFtraining@permainc.com for additional information or to request an invite.

In the subject line of the email, please include ***Training – Fund Name and Client Name***. Please be sure to add the date of the training you would like to attend in your email so an invite can be sent.

COVERAGE UPDATES: None

EXPRESS-SCRIPTS UPDATE:

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

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

SaveOn – Effective 7/1/24

ESI's updated SaveOn list effective 7/1/24 has been released. Drugs highlighted in green are new drugs effective 7/1/24. The drugs highlighted in red are excluded effective 7/1/24. CJHIF had no members impacted by the removal of SaveOn drugs. The updated listing has been sent to brokers.

Notice of Creditable Coverage (NOCC)

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

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

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

- BMI ≥ 32 **OR**
- BMI between $27 \leq 32$ **WITH** 2 or more documented comorbidities

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

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

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

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

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

PLEASE NOTE: Only those who are due to renew their PA or have recently been approved for a weight loss medication will receive a communication in the mail.

New groups joining 9/1/24 and after will be implemented with the Encircle Program

OPERATIONAL UPDATES:

2024 PCORI Fees – Due July 31, 2024

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

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

2024 LEGISLATIVE REVIEW: None

Medical and Rx Reporting: None

No Surprise Billing and Transparency – Continued Delays

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

2023 Specialized Audits

As approved through an RFP through the Program Manager's contract, the HIFs has acquired the services of AIM to conduct specialized audits for the Central New Jersey Health Insurance Fund (CJHIF). AIM will begin with completing medical claims audits for claims administered by Aetna. The claim audit being performed will determine Aetna's claim processing and financial accuracy of medical claims. AIM will also perform an Operation Review. Aim will perform an in-depth evaluation of the controls employed by the Aetna to ensure quality administration. **See Appendix.**

Carrier Appeals:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
04/24/2024	Aetna/Medical	CJHIF 2024-04-04	Allowed amount for surgery	Overturned	05/14/2024
04/23/2024	Aetna/Medical	CJHIF 2024-05-01	Arthroscopy	Upheld	05/03/2024
04/05/2024	Aetna/Medical	CJHIF 2024-05-02	Prosthesis	Upheld	04/17/2024
05/22/2024	Aetna/Medical	CJHIF 2024-05-03	Psychotherapy Services	Upheld	05/30/2024
06/21/2024	Aetna/Medical	CJHIF 2024-06-01	Anesthesia	Upheld	06/26/2024

IRO Submissions:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
05/16/2024	Aetna/Medical	CJHIF 2024-05-01	Arthroscopy	Overturned	05/22/2024
05/17/2024	Aetna/Medical	CJHIF 2024-05-02	Prosthesis	Upheld	05/23/2024

CENTRAL JERSEY HEALTH INSURANCE FUND

BILLS LIST

Resolution No.

JUNE 2024

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

BE IT RESOLVED that the 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>
002465	ABERDEEN TOWNSHIP	REIMB. FOR WELLNESS EXPENSES 2022	16,776.95
002465			16,776.95
		Total Payments FY 2022	16,776.95

FUND YEAR 2023

<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
ACCESS	INV 10480730 DEPT MAIN- 9/30/23	14.27
		14.27
	Total Payments FY 2023	14.27

FUND YEAR 2024

<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
Flagship Health System	VOID AND REISSUE	-89.96
Flagship Health System	VOID AND REISSUE	-321.34
		-411.30
AETNA HEALTH MANAGEMENT LLC	MEDICARE ADVANTAGE 06/24	386,111.61
		386,111.61
Flagship Health System	DENTAL- PLUMSTEAD 6/1/24 INV 151239	89.96
Flagship Health System	DENTAL- MONTGOMERY 6/1/24 INV 151086	304.73
Flagship Health System	DENTAL- MONTGOMERY 4/1/24 INV 150135	321.34
Flagship Health System	DENTAL- PLUMSTEAD 4/1/24 INV 150288	89.96
		805.99
AETNA LIFE INSURANCE COMPANY	VISION TPA 06/24	183.82
AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 06/24	96,200.82
		96,384.64
AMERIHEALTH ADMINISTRATORS	WELLNESS CREDIT 06/24	-22.50
AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 06/24	736.02
		713.52

DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 06/24	7,100.84 7,100.84
PERMA RISK MANAGEMENT SERVICES	POSTAGE 05/24	177.11
PERMA RISK MANAGEMENT SERVICES	ADMIN FEES 06/24	47,152.80 47,329.91
BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEES 06/24	3,036.00 3,036.00
STEPHEN MAYER	TREASURER FEE 06/24	1,083.00 1,083.00
MEDICAL EVALUATION SPECIALISTS	MED CASE 2411097 5/23/24	367.50 367.50
CONNER STRONG & BUCKELEW	PLAN DOCUMENTS 06/24	1,250.00
CONNER STRONG & BUCKELEW	MEW MEMBER COMMISSION 06/24	82,508.73
CONNER STRONG & BUCKELEW	PROGRAM MANAGER FEES 06/24	93,862.37
CONNER STRONG & BUCKELEW	DENTAL COMMISSION 06/24	373.37
CONNER STRONG & BUCKELEW	FUND COORDINATOR 06/24	5,747.29
CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 06/24	2,352.96 186,094.72
ACCESS	INV 10928947 DEPT 420 05/31/24	100.86
ACCESS	INV 10864930 DEPT 420 4/30/24	86.77 187.63
GANNETT NEW YORK-NJ LOCALIQ	A# 1120753 INV 6435257- 10206615 5/24/24	105.88 105.88
MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 06/24	107,855.75 107,855.75
SYMETRA FINANCIAL	SPECIFIC REINSURANCE FEE-SINGLE 06/24	35,330.97
SYMETRA FINANCIAL	AGGREGATE 06/24	3,894.80
SYMETRA FINANCIAL	SPECIFIC REINSURANCE FEE-FAMILY 06/24	71,460.38 110,686.15
	Total Payments FY 2024	947,451.84
	TOTAL PAYMENTS ALL FUND YEARS	964,243.06

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
SUPPLEMENTAL BILLS LIST**

Resolution No.

JUNE 2024

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

BE IT RESOLVED that the 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 2023

<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
MERCADIEN	2023 FINAL AUDIT- INV 221082 05/24	6,000.00
		6,000.00
	Total Payments FY 2023	6,000.00
	TOTAL PAYMENTS ALL FUND YEARS	6,000.00

Chairperson

Attest:

Dated: _____

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

Treasurer

Central Jersey Municipal Employee Benefits Fund										
SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED										
Current Fund Year: 2024 Month Ending: April										
	Medical	Dental	Rx	Vision	Reinsurance	DMO Premiums	Dividend Reserve	Admin	0	TOTAL
OPEN BALANCE	3,905,271.85	457,506.86	4,198,897.01	59,486.40	(316,327.94)	794.10	171,530.64	440,618.75	0.00	8,917,777.67
RECEIPTS										
Assessments	5,407,144.44	196,995.04	926,613.32	3,701.85	258,013.49	466.99	0.00	508,612.15	0.00	7,301,547.28
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Invest Pymnts	24,940.71	1,149.64	13,278.39	133.46	3.96	0.92	313.80	1,062.67	0.00	40,883.55
Invest Adj	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Subtotal Invest	24,940.71	1,149.64	13,278.39	133.46	3.96	0.92	313.80	1,062.67	0.00	40,883.55
Other *	35,500.09	0.00	403,230.00	0.00	0.00	0.00	0.00	0.00	0.00	438,730.09
TOTAL	5,467,585.24	198,144.68	1,343,121.71	3,835.31	258,017.45	467.91	313.80	509,674.82	0.00	7,781,160.92
EXPENSES										
Claims Transfers	4,513,104.86	134,480.32	1,210,214.29	0.00	0.00	0.00	0.00	0.00	0.00	5,857,799.47
Expenses	339,871.89	411.30	0.00	0.00	204,938.89	0.00	896.00	329,106.57	0.00	875,224.65
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	4,852,976.75	134,891.62	1,210,214.29	0.00	204,938.89	0.00	896.00	329,106.57	0.00	6,733,024.12
END BALANCE	4,519,880.34	520,759.92	4,331,804.43	63,321.71	(263,249.38)	1,262.01	170,948.44	621,187.00	0.00	9,965,914.47

CERTIFICATION AND RECONCILIATION OF CLAIMS PAYMENTS AND RECOVERIES									
Central Jersey Municipal Employee Benefits Fund									
Month		April							
Current Fund Year		2024							
Policy Year	Coverage	1. Calc. Net Paid Thru Last Month	2. Monthly Net Paid April	3. Monthly Recoveries April	4. Calc. Net Paid Thru April	5. TPA Net Paid Thru April	6. Variance To Be Reconciled	7. Delinquent Unreconciled Variance From	8. Change This Month
2024	Medical	6,055,809.84	3,071,071.26	0.00	9,126,881.10	0.00	9,126,881.10	6,055,809.84	3,071,071.26
	Dental	328,243.22	130,609.07	0.00	458,852.29	0.00	458,852.29	328,243.22	130,609.07
	Rx	2,042,670.32	794,429.12	0.00	2,837,099.44	0.00	2,837,099.44	2,042,670.32	794,429.12
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	8,426,723.38	3,996,109.45	0.00	12,422,832.83	0.00	12,422,832.83	8,426,723.38	3,996,109.45
2023	Medical	2,838,512.56	151,655.30	0.00	2,990,167.86	0.00	2,990,167.86	2,838,512.56	151,655.30
	Dental	62,737.95	3,871.25	0.00	66,609.20	0.00	66,609.20	62,737.95	3,871.25
	Rx	237,138.56	0.00	0.00	237,138.56	0.00	237,138.56	237,138.56	0.00
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	3,138,389.07	155,526.55	0.00	3,293,915.62	0.00	3,293,915.62	3,138,389.07	155,526.55
2022	Medical	43,448.19	6,272.01	0.00	49,720.20	0.00	49,720.20	43,448.19	6,272.01
	Dental	596.80	0.00	0.00	596.80	0.00	596.80	596.80	0.00
	Rx	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	44,044.99	6,272.01	0.00	50,317.00	0.00	50,317.00	44,044.99	6,272.01
2021	Medical	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Closed Year	Medical	(7,251.79)	(408.29)	0.00	(7,660.08)	0.00	(7,660.08)	(7,251.79)	(408.29)
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	(7,251.79)	(408.29)	0.00	(7,660.08)	0.00	(7,660.08)	(7,251.79)	(408.29)
Lakewood	Medical	3,015,301.97	1,284,514.58	0.00	4,299,816.55	0.00	4,299,816.55	3,015,301.97	1,284,514.58
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	299,123.38	415,785.17	0.00	714,908.55	0.00	714,908.55	299,123.38	415,785.17
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	3,314,425.35	1,700,299.75	0.00	5,014,725.10	0.00	5,014,725.10	3,314,425.35	1,700,299.75
0	Medical	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	0.00	0.00	0.00	19 0.00	0.00	0.00	0.00	0.00
	TO TOTAL	14,916,331.00	5,857,799.47	0.00	20,774,130.47	0.00	20,774,130.47	14,916,331.00	5,857,799.47

SUMMARY OF CASH AND INVESTMENT INSTRUMENTS					
Central Jersey Municipal Employee Benefits Fund					
ALL FUND YEARS COMBINED					
CURRENT MONTH	April				
CURRENT FUND YEAR	2024				
<div> <div>Description:</div> <div>N.J.C.M.F.</div> <div>Investments</div> <div>Ocean First Admin.</div> </div>					
ID Number:					
Maturity (Yrs)					
Purchase Yield: 0.7					
TOTAL for All					
Accts & instruments					
Opening Cash & Investment Balance	\$8,917,777.87	0 \$	3,916,373.99 \$	5,001,403.88	
Opening Interest Accrual Balance	\$27,172.20	0 \$	27,172.20 \$	-	
1	Interest Accrued and/or Interest Cost	\$6,154.96	\$0.00	\$6,154.96	\$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	\$13,806.10	\$0.00	\$1,666.37	\$12,139.73
6	Interest Paid - Term Instr.s	\$26,000.00	\$0.00	\$26,000.00	\$0.00
7	Realized Gain (Loss)	\$1,077.50	\$0.00	\$1,077.50	\$0.00
8	Net Investment Income	\$21,038.56	\$0.00	\$8,898.83	\$12,139.73
9	Deposits - Purchases	\$7,740,277.37	\$0.00	\$0.00	\$7,740,277.37
10	(Withdrawals - Sales)	-\$6,733,024.12	\$0.00	\$0.00	-\$6,733,024.12
		ok	ok	ok	
Ending Cash & Investment Balance	\$9,965,914.72	\$0.00	\$3,945,117.86	\$6,020,796.86	
Ending Interest Accrual Balance	\$7,327.16	\$0.00	\$7,327.16	\$0.00	
Plus Outstanding Checks	\$0.00	\$0.00	\$0.00	\$0.00	
(Less Deposits in Transit)	\$0.00	\$0.00	\$0.00	\$0.00	
Balance per Bank	\$9,965,914.72	\$0.00	\$3,945,117.86	\$6,020,796.86	



CENTRAL JERSEY HEALTH INSURANCE FUND

Monthly Claim Activity Report

May 15, 2024



CENTRAL JERSEY HEALTH INSURANCE FUND

	MEDICAL CLAIMS PAID 2023	# OF EES	PER EE	MEDICAL CLAIMS PAID 2024	# OF EES	PER EE
JANUARY	\$3,609,993	2,143	\$ 1,685	\$4,175,822	2,205	\$ 1,894
FEBRUARY	\$2,923,452	2,138	\$ 1,367	\$3,968,434	2,198	\$ 1,805
MARCH	\$3,416,354	2,127	\$ 1,606	\$3,663,556	2,193	\$ 1,671
APRIL	\$3,334,315	2,129	\$ 1,566	\$5,029,716	2,191	\$ 2,296
MAY	\$4,258,066	2,161	\$ 1,970	\$3,785,711	2,305	\$ 1,642
JUNE	\$3,874,228	2,164	\$ 1,790			
JULY	\$3,060,025	2,181	\$ 1,403			
AUGUST	\$4,296,915	2,175	\$ 1,976			
SEPTEMBER	\$4,522,360	2,167	\$ 2,087			
OCTOBER	\$3,976,935	2,173	\$ 1,830			
NOVEMBER	\$4,299,056	2,170	\$ 1,981			
DECEMBER	\$3,644,271	2,180	\$ 1,672			
TOTALS	\$45,215,972			\$20,623,240		
				2024 Average	2,218	\$ 1,862
				2023 Average	2,159	\$ 1,744

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

Plan Sponsor Unique ID : All
Customer: Central New Jersey Health Insurance Fund
Group / Control: 00143735,00285786,00659552,00737415,00866354,SI362223

Paid Dates: 04/01/2024 - 04/30/2024
Service Dates: 01/01/2011 - 04/30/2024
Line of Business: All

	Paid Amt
	\$116,799.91
	\$116,403.14
	\$100,393.41
Total:	\$333,596.46



**Medical Claims Paid :
January 2024 - May 2024**

Total Medical Paid per EE: **\$1,862**

Network Discounts

Inpatient: **61.0%**
Ambulatory: **64.6%**
Physician/Other: **67.9%**
TOTAL: 65.3%

Provider Network

% Admissions In-Network: **97.5%**
% Physician Office: **90.4%**

Aetna Book of Business:
Admissions 98.7%; Physician 90.4%

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

- Jersey Shore Medical
- Community Medical Center
- Ocean University Medical Center
- RWJUH New Brunswick
- Monmouth Medical Center

**Catastrophic Claim Impact
January 2024 – May 2024**

Number of Claims Over \$50,000: **58**
Claimants per 1000 members: **10.8**
Avg. Paid per Claimant: **\$103,394**
Percent of Total Paid: **30.9%**
• Aetna BOB- HCC account for an average of 43.2% of total Medical Cost

**Aetna One Flex Member Outreach:
Through May 2024**

Total Members Identified: **1,277**
Members Targeted for 1:1 Nurse Support : **346**
Members Targeted for Digital Activity: **931**
Member 1:1 outreach completed: **314**
Member 1:1 Outreach in Progress: **57**

**Teladoc Activity:
January 2024– March 2024**

Total Registrations:**58**
Total Online Visits: **176**
Total Net Claims Savings: **\$81,733**
Total Visits w/ Rx: **176**
Mental Health Visits: **29**
Dermatology Visits: **11**

**Service Center Performance Goal
Metrics YTD 2024**

Customer Service Performance

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

Claims Performance

Financial Accuracy: **98.25%***
*Q4 2023

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

**Claims Performance (Monthly)
(April 2024)**

90% processed w/in: **6.6 days**
95% processed w/in: **10.3 days**
(Note: This is not a PG metric)

Performance Goals

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


Financial Accuracy: **99%**

Turnaround Time

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





	<div></div>															
2024 Central HIF							2023 Central HIF									
		MEDICAL CLAIMS PAID 2024	TOTAL	# OF EES	PER EE				MEDICAL CLAIMS PAID 2023		TOTAL		# OF EES		PER EE	
JANUARY		\$11,473.96	\$11,473.96	21	\$546.37		JANUARY		\$18,830.18		\$18,830.18		19		\$991.05	
FEBRUARY		\$17,614.16	\$17,614.16	20	\$880.70		FEBRUARY		\$36,311.57		\$36,311.57		19		\$1,911.13	
MARCH		\$17,270.46	\$17,270.46	20	\$863.52		MARCH		\$53,195.75		\$53,195.75		20		\$2,659.78	
APRIL		\$13,834.99	\$13,834.99	19	\$728.15		APRIL		\$43,552.88		\$43,552.88		20		\$2,177.64	
MAY		\$12,505.16	\$12,505.16	19	\$658.16		MAY		\$25,227.03		\$25,227.03		20		\$1,261.35	
JUNE		\$16,428.54	\$16,428.54	18	\$912.69		JUNE		\$42,298.41		\$42,298.41		20		\$2,114.92	
JULY							JULY		\$27,313.74		\$27,313.74		22		\$1,241.53	
AUGUST							AUGUST		\$21,973.90		\$21,973.90		21		\$1,046.38	
SEPTEMBER							SEPTEMBER		\$10,677.28		\$10,677.28		21		\$508.44	
OCTOBER							OCTOBER		\$17,067.79		\$17,067.79		20		\$853.38	
NOVEMBER							NOVEMBER		\$17,991.29		\$17,991.29		20		\$899.56	
DECEMBER							DECEMBER		\$17,885.50		\$17,885.50		21		\$851.69	
TOTALS		\$89,127.27					TOTALS		\$332,325.32				20.25		\$1,376.40	
			2024 Average	20	\$764.93											



EXPRESS SCRIPTS®

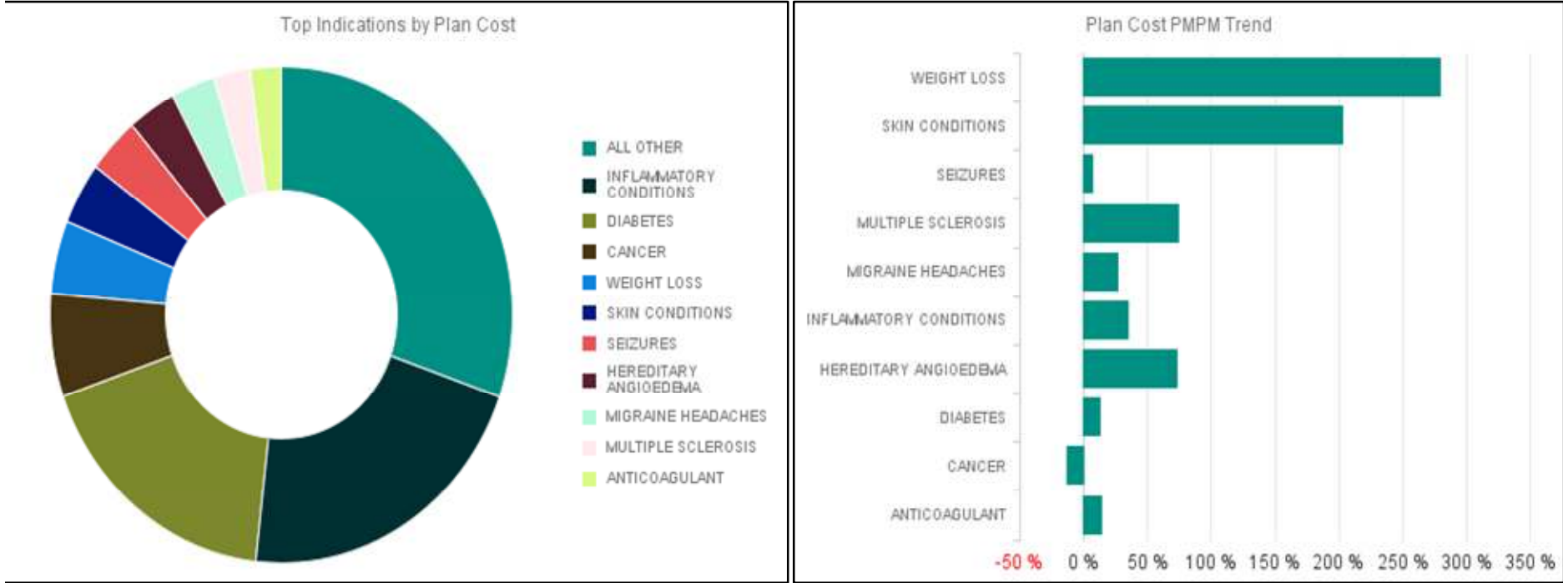
Central Jersey Health Insurance Fund

Total Component/ Date of Service (Month)	2023 01	2023 02	2023 03	2023 Q1	2023 04	2023 05	2023 06	2023 Q2	2023 07	2023 08	2023 09	2023 Q3	2023 10	2023 11	2023 12	2023 Q4	2023 YTD
Membership	2,984	2,990	2,993	2,989	2,993	3,001	2,999	2,998	3,014	3,020	3,012	3,015	3,015	3,015	3,030	3,020	3,006
Total Days	127,961	112,223	118,710	358,894	119,821	122,117	116,188	358,126	119,316	126,752	113,534	359,602	122,815	119,802	114,322	356,939	1,433,561
Total Patients	1,213	1,149	1,180	1,809	1,114	1,168	1,120	1,746	1,126	1,118	1,102	1,743	1,240	1,213	1,223	1,875	2,512
Total Plan Cost	\$627,286	\$520,265	\$572,443	\$1,719,993	\$675,806	\$641,844	\$699,647	\$2,017,298	\$663,079	\$722,742	\$651,629	\$2,037,450	\$775,505	\$729,104	\$739,631	\$2,244,240	\$8,018,981
Generic Fill Rate (GFR) - Total	83.5%	84.7%	84.5%	84.2%	85.2%	86.4%	85.2%	85.6%	86.8%	86.1%	83.4%	85.5%	84.1%	85.4%	85.6%	85.0%	85.1%
Plan Cost PMPM	\$210.22	\$174.00	\$191.26	\$191.81	\$225.80	\$213.88	\$233.29	\$224.32	\$220.00	\$239.32	\$216.34	\$225.23	\$257.22	\$241.83	\$244.10	\$247.71	222.34
Total Specialty Plan Cost	\$240,775	\$223,675	\$228,988	\$693,438	\$308,751	\$273,943	\$361,613	\$944,307	\$300,422	\$354,660	\$279,421	\$934,504	\$397,773	\$330,448	\$390,625	\$1,118,846	\$3,691,094
Specialty %of Total Specialty Plan Cost	38.4%	43.0%	40.0%	40.3%	45.7%	42.7%	51.7%	46.8%	45.3%	49.1%	42.9%	45.9%	51.3%	45.3%	52.8%	49.9%	46.0%

Total Component/ Date of Service (Month)	2024 01	2024 02	2024 03	2024 Q1	2024 04	2024 05	2024 06	2024 Q2	2024 07	2024 08	2024 09	2024 Q3	2024 10	2024 11	2024 12	2024 Q4	2024 YTD
Membership	3,045	3,020	3,029	3,031	3,021	3,271											
Total Days	129,293	124,083	116,766	370,142	124,353	132,803											
Total Patients	1,228	1,225	1,206	1,882	1,175	1,237											
Total Plan Cost	\$755,850	\$735,690	\$754,535	\$2,246,075	\$725,077	\$879,492											
Generic Fill Rate (GFR) - Total	86.5%	86.0%	87.5%	86.6%	86.0%	86.4%											
Plan Cost PMPM	\$248.23	\$243.61	\$249.10	\$246.98	\$240.01	\$268.88											
%Change Plan Cost PMPM	18.1%	40.0%	30.2%	28.8%	6.3%	25.7%											
Total Specialty Plan Cost	\$369,803	\$324,198	\$395,648	\$1,089,649	\$318,327	\$419,220											
Specialty %of Total Specialty Plan Cost	48.9%	44.1%	52.4%	48.5%	43.9%	47.7%											

Top Indications

CENTRAL JERSEY HEALTH INSUR. (Current Period 01/2024 - 05/2024 vs. Previous Period 01/2023 - 05/2023) Peer = Government - National Preferred Formulary



			Current Period						Previous Period						Trend
Rank	Peer Rank	Indication	Market Share	Adjusted Rx	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Market Share	Adjusted Rx	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Plan Cost PMPM
1	2	INFLAMMATORY CONDITIONS	30.7 %	195	\$826,145	\$53.69	40.0 %	34.9 %	29.8 %	150	\$596,730	\$39.89	47.3 %	39.6 %	34.6 %
2	1	DIABETES	25.7 %	2,014	\$690,736	\$44.89	28.0 %	26.1 %	29.8 %	2,015	\$594,790	\$39.76	29.6 %	29.1 %	12.9 %
3	3	CANCER	9.6 %	88	\$258,794	\$16.82	81.8 %	76.6 %	14.5 %	111	\$289,997	\$19.38	78.4 %	77.9 %	-13.2 %
4	4	WEIGHT LOSS	6.8 %	182	\$184,125	\$11.97	3.8 %	5.6 %	2.4 %	47	\$47,143	\$3.15	10.6 %	10.6 %	279.8 %
5	5	SKIN CONDITIONS	5.8 %	290	\$156,304	\$10.16	77.9 %	86.0 %	2.5 %	235	\$50,150	\$3.35	86.4 %	88.0 %	203.1 %
6	9	SEIZURES	5.3 %	491	\$141,663	\$9.21	88.0 %	96.8 %	6.4 %	478	\$128,454	\$8.59	86.0 %	96.7 %	7.2 %
7	10	HEREDITARY ANGIOEDEMA	4.8 %	5	\$130,320	\$8.47	0.0 %	13.5 %	3.7 %	5	\$73,096	\$4.89	0.0 %	6.6 %	73.4 %
8	6	MIGRAINE HEADACHES	4.4 %	161	\$119,165	\$7.75	33.5 %	52.5 %	4.6 %	128	\$91,812	\$6.14	33.6 %	56.2 %	26.2 %
9	8	MULTIPLE SCLEROSIS	3.7 %	18	\$98,566	\$6.41	33.3 %	47.4 %	2.7 %	11	\$54,927	\$3.67	54.5 %	44.1 %	74.5 %
10	7	ANTICOAGULANT	3.1 %	180	\$84,406	\$5.49	11.1 %	19.4 %	3.6 %	159	\$72,179	\$4.82	6.3 %	22.1 %	13.7 %
Total Top 10				3,624	\$2,690,223	\$174.85	40.2 %	43.3 %		3,339	\$1,999,278	\$133.63	42.9 %	46.8 %	30.8 %

Top Drugs

CENTRAL JERSEY HEALTH INSUR. (Current Period 01/2024 - 05/2024 vs. Previous Period 01/2023 - 05/2023) Peer = Government - National Preferred Formulary

					Current Period				Previous Period				Trend
Rank	Peer Rank	Brand Name	Indication	Specialty Drug	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Plan Cost PMPM
1	6	STELARA	INFLAMMATORY CONDITIONS	Y	19	5	\$250,992	\$16.31	22	5	\$245,919	\$16.44	-0.8 %
2	1	OZEMPIC	DIABETES	N	286	60	\$246,541	\$16.02	154	40	\$129,634	\$8.66	84.9 %
3	4	HUMIRA(CF) PEN	INFLAMMATORY CONDITIONS	Y	34	6	\$233,327	\$15.16	19	5	\$142,638	\$9.53	59.1 %
4	171	HAEGARDA	HEREDITARY ANGIOEDEMA	Y	5	1	\$130,320	\$8.47	5	1	\$73,096	\$4.89	73.4 %
5	12	WEGOVY	WEIGHT LOSS	N	80	23	\$94,670	\$6.15	29	10	\$34,633	\$2.31	165.8 %
6	52	HUMIRA PEN	INFLAMMATORY CONDITIONS	Y	7	2	\$91,331	\$5.94	9	2	\$87,331	\$5.84	1.7 %
7	13	DUPIXENT PEN	SKIN CONDITIONS	Y	30	7	\$89,586	\$5.82	3	1	\$7,256	\$0.48	1100.6 %
8	17	ZEPBOUND	WEIGHT LOSS	N	86	23	\$82,363	\$5.35	NA	NA	NA	NA	NA
9	168	LENVIMA	CANCER	Y	4	1	\$80,405	\$5.23	5	1	\$74,764	\$5.00	4.6 %
10	14	SKYRIZI PEN	INFLAMMATORY CONDITIONS	Y	13	3	\$78,828	\$5.12	NA	NA	NA	NA	NA
11	51	REVLIMID	CANCER	Y	5	1	\$75,065	\$4.88	2	1	\$34,121	\$2.28	113.9 %
12	69	SPRYCEL	CANCER	Y	5	1	\$70,723	\$4.60	8	2	\$82,837	\$5.54	-17.0 %
13	19	FARXIGA	DIABETES	N	130	23	\$68,154	\$4.43	119	29	\$60,165	\$4.02	10.1 %
14	27	RINVOQ	INFLAMMATORY CONDITIONS	Y	12	2	\$60,432	\$3.93	6	1	\$25,992	\$1.74	126.1 %
15	3	MOUNJARO	DIABETES	N	58	13	\$56,603	\$3.68	14	4	\$12,943	\$0.87	325.2 %
16	24	ELIQUIS	ANTICOAGULANT	N	103	25	\$55,016	\$3.58	94	25	\$45,345	\$3.03	18.0 %
17	10	JARDIANCE	DIABETES	N	88	19	\$47,918	\$3.11	100	20	\$53,279	\$3.56	-12.5 %
18	30	NURTEC ODT	MIGRAINE HEADACHES	N	32	11	\$41,167	\$2.68	16	7	\$22,335	\$1.49	79.2 %
19	34	DUPIXENT SYRINGE	SKIN CONDITIONS	Y	16	4	\$41,020	\$2.67	9	2	\$21,768	\$1.45	83.2 %
20	215	TROKENDI XR	SEIZURES	N	18	2	\$39,634	\$2.58	18	3	\$24,862	\$1.66	55.0 %
21	53	QULIPTA	MIGRAINE HEADACHES	N	35	10	\$35,733	\$2.32	31	7	\$30,233	\$2.02	14.9 %
22	306	AVONEX	MULTIPLE SCLEROSIS	Y	6	1	\$33,432	\$2.17	3	1	\$15,836	\$1.06	105.3 %
23	144	ZEPOSIA	MULTIPLE SCLEROSIS	Y	5	1	\$31,438	\$2.04	2	1	\$11,574	\$0.77	164.1 %
24	613	RUFINAMIDE	SEIZURES	N	4	1	\$29,753	\$1.93	4	1	\$34,725	\$2.32	-16.7 %
25	47	UBRELVY	MIGRAINE HEADACHES	N	26	11	\$29,665	\$1.93	28	11	\$29,404	\$1.97	-1.9 %
Total Top 25					1,107		\$2,094,114	\$136.11	700		\$1,300,690	\$86.94	56.6 %



Claims Summary

CENTRAL JERSEY HEALTH INSURANCE FUND - 03601

January 2023 - December 2023

Cost Containment

Claims	Dollars	Definition
Submitted Claims	\$4,424,786	Claims submitted by participating and non-participating dentists
(-) Savings		
(-)Network Discount	\$1,306,030	Savings from network participating dentist discounts
(-)Administrative	\$618,610	Contract limits, non-covered, non-billable services, optional services
(-)Dental Consultant	\$27,534	Clinical claim review by dental consultants
(-)Eligibility Verification	\$26,886	Claims for in-eligible members
(-)COB	\$133,521	Coordination of benefits
(-)Other	\$751,622	Deductibles, patient coinsurance
(=)Total Savings	\$2,864,203	
Delta Dental Paid	\$1,560,583	Amount paid by Delta Dental

Network Discount

Network	Submitted Claims	Paid Claims	Network Discount	Network Discount / Submitted Claims
Total Network Discount	\$4,013,032	\$1,459,982	\$1,306,030	32.54%
Out of Network	\$411,754	\$100,601		
Total	\$4,424,786	\$1,560,583	\$1,306,030	

Everyone Deserves a Healthy Smile

**CENTRAL JERSEY HEALTH INSURANCE FUND
CONSENT AGENDA
May 15, 2024**

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 26-24: 2024 Wellness Grants.....Page 33
Resolution 27-24: 2024 Approving June and July Bills.....Page 35

RESOLUTION NO. 26-24**CENTRAL JERSEY HEALTH INSURANCE FUND
ADOPTING 2024 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, 2024 through December 31, 2024. This budget includes \$150,000 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 (Wellness Days)	Option 3 (Build Own)	Amount Requested	Wellness Champion Stipend	Total	Notes
Oceanport			X	\$3,780.00		\$3,780.00	Preferred Behavior EHP plan for all employees;
Atlantic Highlands			X			\$9,850.00	Medication Review by local pharmacy; blood glucose and A1C checks; Gym memberships
Montgomery Township			X	\$9,760.00		\$9,760.00	Wellworks challenges, biometric screenings, wellness based education
Lakewood Township			X	\$15,500.00	\$1,500.00	\$17,000.00	Callenge, Wellness Workshops, Fair, Wellbeing initiatives
Brielle Borough			X		\$1,100.00	\$6,000.00	Water and Walk Challenge
Bedminster			X			\$7,500.00	Kickball Tournament with healthy lunch, step challenges by Terryberry with prizes
MCBOA			X			\$2,640.00	Step Challenges and Gym reimbursements
Aberdeen					\$700.00	\$24,885.00	healthy luncheon kickoff, various gym and 5k runs challenges, farm fresh program, introducing Wellable challenge this year and a health fair in the fall. Looking to incorporate biometric screening this year, and additional equipment for the gym
Totals						\$81,415.00	
Remainder available for Grants						\$68,585.00	

WHEREAS, on July 17, 2024, the Commissioners of Central Jersey Health Insurance Fund approved Wellness Grant Programs totaling \$24,885:

CENTRAL JERSEY HEALTH INSURANCE FUND

ADOPTED: MAY 15, 2024

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

RESOLUTION NO. 27-24

**CENTRAL JERSEY HEALTH INSURANCE FUND
APPROVAL OF THE JUNE AND JULY 2024 BILLS LISTS**

WHEREAS, the Central Jersey Health Insurance Fund held a Public Meeting on **July 17, 2024** for the purposes of conducting the official business of the Fund; and

WHEREAS, The Treasurer for the Fund presented bills lists to satisfy outstanding costs incurred for operating the Fund during the months of June and July 2024 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 April 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 June and July 2024 prepared by the Treasurer of the Fund and duly authorize and concur said bills to be paid expeditiously, in accordance with the laws and regulations promulgated by the State of New Jersey for Municipal Health Insurance Funds.

NOW, THEREFORE BE IT FURTHER RESOLVED, the Commissioners of the Executive Committee of the 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: July 17, 2024

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

APPENDIX I

CENTRAL JERSEY HEALTH INSURANCE FUND
OPEN MINUTES
May 15, 2024
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 2024 EXECUTIVE COMMITTEE

CHAIRPERSON		
Thomas Nolan	Borough of Brielle	Present
SECRETARY		
Brian Brach	Manasquan RRSA	Present
EXECUTIVE	COMMITTEE	
Diane Lapp	Township of Manchester	Present
Brian Valentino	Western Monmouth MUA	Present
Brian Dempsey	Spring Lake Borough	Present
Peter O'Reilly	Borough of Lakewood	Present
Angela Morin	Aberdeen	Present
ALTERNATES:		
James Gant	Red Bank	Absent

APPOINTED OFFICIALS PRESENT:

Executive Director/Administrator	PERMA Risk Management Services	Brandon Lodics Emily Koval	Present Present
Program Manager	Conner Strong & Buckelew	Crystal Bailey	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	Crista O'Donnell	Present
Rx Administrator	Express Scripts	Hiteksha Patel	Absent

Auditor	Mercadien	Digesh Patel Jack Hammell	Present Present
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OTHERS PRESENT:

Jim Diaz	Jackson MUA
Christine Lisiewski	Harvey Cedars
Brian Kiely	Reliance
Diane Peterson	Conner strong & Buckelew
Lisa Hardman	Brown & Brown
Liz Flanders	AJG
Tom Fletcher	Reliance
Joe Zanga	South River

APPROVAL OF MINUTES: March 20, 2024 OPEN:

MOTION TO APPROVE OPEN MINUTES OF March 20, 2024

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

CORRESPONDENCE: None

PRO FORMA REPORTS

➤ **Fast Track Financial Report** – as of February 29, 2024 (page 5)

Mr. Lodics welcomed Jordyn's new baby and her family is doing well.

The Financial Fast Track through 2/29 was higher than expected. We typically do see slower January and a catch up in February. Not a concern and our surplus s over 2.5 months and cash is fine. We will continue to monitor as the year progresses.

AUDITOR AND ACTUARY YEAR-END REPORTS -A draft of the Fund Year 2023 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 Mercadien will be in attendance to present their findings. Should there be any comments, PERMA will be prepared to answer. Resolution 19-24 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 2022. All IBNR has been expensed and there are no outstanding accounts receivable or payable. Resolution 20-24 allows for closing this year.

Mr. Patel thanked management for providing the required information and it was an unmodified opinion, although the auditors do not opine on IBNR. There are no findings or recommendation. There is a management recommendation for members to continue to send their I&Ts 90 days within the renewal. We recommend they comply with the bylaws. There was no disagreements with management. No new standards.






Executive Director said we will continue to work with those groups that have missing documents.

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

FDS online Submissions System

NJDCA -

2024 Local Government Officer - Roster

Selection  Status: ACTIVE    					
Last Name	First Name	Middle Name	Status	Updated ON	Filed
Clark	Michele		ACTIVE	03/23/2022	No
Dale	Daina		ACTIVE	03/28/2017	No
Gant	James		ACTIVE	03/26/2024	No
Gonter	Jason		ACTIVE	03/26/2024	No
Jennings	Lester		ACTIVE	03/23/2022	No
Mullins	Christopher		ACTIVE	03/20/2023	No

COMPETITIVE CONTRACTING - CONSULTANTS AND PROFESSIONALS

Last year, the Executive Committee approved the Fund QPA to issue competitive contracting RFPs for expiring contracts. All EUS and Professional contracts term at the end of the year.

Contract	Professional	Contract Term	Last RFP
Administration	PERMA	1/1/2022-12/31/2024	6/24/2021
Attorney	Jack Sahradnick	1/1/2024 -12/31/2024	6/24/2021
Treasurer	Steve Mayer	1/1/2024 -12/31/2024	6/24/2021
Auditor	Mercadien	1/1/2024 -12/31/2024	6/24/2021
Program Manager	Conner Strong	1/1/2022-12/31/2024	6/24/2021
Actuary	John Vataha	1/1/2024 -12/31/2024	6/24/2021

Resolution 21-24 allows PERMA and the QPA to issue Competitive Contracting RFPs for all positions above. The Contracts Committee will be included throughout this process and expect to have contract award recommendations in July.

NEW MEMBER – BOROUGH OF SEASIDE PARK - The Borough of Seaside Park passed a resolution to join and filed their indemnity and trust and became a new Fund member on May 1st. The agreement was received after the March meeting. The Finance Committee reviewed the Actuarially approved underwriting and supported their membership. They are a good fit for the CJHIF geographically and demographically.

Included in the consent agenda is a retroactive approval resolution, 22-24.

New Member Overview	
Fund	Central Jersey Health Insurance Fund
Entity	Seaside Park Borough
County	Ocean County
Effective Date	5/1/2024 - 12/31/2024
Lines of Coverage	Medical and Prescription
Eligible Employees	50
Retiree Coverage	Under 65 and Medicare Advantage Retiree Coverage
Current Arrangement	State Health Benefits
Actuary Certification	Yes: Standard Underwriting Methodology
Broker	Conner Strong and Buckelew
Broker Fee	2%
Run Out Claims	State Health Benefits
Member approval?	All required resolutions passed
Special Requests	N/A

2024 WELLNESS GRANT APPLICATIONS - The Monmouth County Bayshore Outfall Authority submitted 2 proposals for a wellness grant. Proposal 1 requests gym attendance and step challenges for a total of \$2,640. The Wellness Committee is recommending approval. The second proposal is for a group outing, which is not an allotted wellness expense. The Committee is recommending approval for Proposal 1 only. Resolution 23-24 is included.

Group Name	Biometric Screenings (option 1)	Option 2 (Wellness Days)	Option 3 (Build Own)	Amount Requested	Wellness Champion Stipend	Total	Notes
Oceanport			X	\$3,780.00		\$3,780.00	Preferred Behavior EHP plan for all employees;
Atlantic Highlands			X			\$9,850.00	Medication Review by local pharmacy; blood glucose and A1C checks; Gym memberships
Montgomery Township			X	\$9,760.00		\$9,760.00	Wellworks challenges, biometric screenings, wellness based education
Lakewood Township			X	\$15,500.00	\$1,500.00	\$17,000.00	Callenge, Wellness Workshops, Fair, Wellbeing initiatives
Brielle Borough			X		\$1,100.00	\$6,000.00	Water and Walk Challenge
Bedminster			X			\$7,500.00	Kickball Tournament with healthy lunch, step challenges by Terryberry with prizes
MCBOA			X			\$2,640.00	Step Challenges and Gym reimbursements
Totals						\$56,530.00	
Remainder available for Grants						\$93,470.00	

The **due date is June 30, 2024** for all members that are interested. The application has been included in the agenda Appendix IV.

OUTSTANDING RECIEVABLES - In closing out the 2022 Fund Year and finalizing the 2023 Annual Audit, there were some minor outstanding receivables from member assessments. Those receivables have been reduced from the member's closed year surplus balance.

HIF COOPERATIVE PURCHASING SYSTEM - All MRHIF Funds have passed resolutions and setup/joiner agreements to develop the HIF Cooperative Purchasing System. The MRHIF Attorney has filed the application, which is in review by the State. The MRHIF QPA has developed draft RFPs for Medical TPA and Medicare Advantage with Prescription coverage, which will be ready for OSC review. Executive Director said we hope that this will be the vehicle we need to get the best contract for all Funds.

WEX (BENEFITS EXPRESS) BENEFITS ADMINISTRATION - MANDATORY USE -Beginning in 2011 on behalf of the Local Funds the Executive Director of the MRHIF entered into a subcontract agreement with WEX (formerly Benefits Express) to provide Benefits Administration services. These services included: enrollment, billing, COBRA, and other administrative services.

The intent of the transition was to support the rapid growth of the Funds by introducing automation into an analog and manual process. It was approved by vote that Fund entities would take over the function of entering employee, retiree and dependent enrollments utilizing the Web based WEX system. This transition of duties was agreed to be mandatory for all Fund participants.

We do not have 100% compliance in this requirement by our HIF members. As a reminder, eligibility, and enrollment the requirement of the entities, though PERMA has in place support to assist members in troubleshooting the system, the team is multifaceted with other roles and responsibilities dedicated to servicing our members. To assure our resources are properly aligned with their intended scope of services, the mandatory requirement will be reinforced.

Beginning on June 1, 2024, the enrollment/billing team members have been instructed that they are no longer able to process enrollments on behalf of entities.

As a reminder regular live video system training is available every 3rd Wednesday of the month at 10:00.

In response to Commissioner Valentino, Executive Director said PERMA performed an audit of who was compliant with this system. This Fund is very good, but there are a few groups that either don't have a login or haven't logged in in 6 months. We will specifically reach out.

INDEMNITY AND TRUST AGREEMENTS - PERMA sent Indemnity and Trust Agreements and Resolutions to be adopted by the governing bodies to renew membership with the Fund for an additional 3 years. Below is a list of members who have renewing agreements have expired. Please reach out to hifadmin@permainc.com for a blank form to be executed. The list was last updated on May 6, 2024,. Executive Director said that any assistance that can be provided to

Member	I&T end date
Shrewsbury Township	12/31/2021
Keyport	12/31/2022
Borough of Sayreville	12/31/2023
Spring Lake	12/31/2023
Highland Elementary School	12/31/2023
Matawan	12/31/2023
Bedminster Township	12/31/2023
Plumsted MUA	5/31/2024

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.

PROGRAM MANAGER'S REPORT - Program Manager reviewed the following items.

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.

System training (new and refresher) is provided to all contacts with WEX access **every 3rd Wednesday at 10AM**. Please contact Austin Flinn, aflinn@permainc.com for additional information or to request an invite.

In the subject line of the email, please include: *Training - Fund Name and Client Name*. Please be sure to add the date of the training you would like to attend in your email so an invite can be sent.

COVERAGE UPDATES:

EXPRESS-SCRIPTS UPDATE:

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

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

- BMI ≥ 32 **OR**
- BMI between $27 \leq 32$ **WITH** 2 or more documented comorbidities

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

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

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

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

Communications will be sent to all impacted members with registration information. Once registered members will receive an access code to sign up for the Omada welcome kit. Program Manager said that it is specifically done to make sure we are not removing anyone off their medication.

PLEASE NOTE: Only those who are due to renew their PA or have recently been approved for a weight loss medication will receive a communication in the mail.

New groups joining 9/1/24 and after will be implemented with the Encircle Program

Resolution 24-24 is in consent, if the Executive Committee deems appropriate to take action.

Program Manager reviewed the program that was presented to the Operations Committee. She said that in 2023, the Funds across the state spent \$5 million in a year, this year we are already spent half of that. There are 1300 members in the Funds across the State that are using these drugs.

In response to Commissioner Brach, Program Manager said these medications are ongoing and can be up to \$1300 a month. The Program is hoping to change lifestyle in an attempt to lose the weight.

OPERATIONAL UPDATES: None

2024 LEGISLATIVE REVIEW:

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

No Surprise Billing and Transparency – Continued Delays

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

2023 Specialized Audits

As approved through an RFP through the Program Manager's contract, the HIFs has acquired the services of AIM to conduct specialized audits for the Central New Jersey Health Insurance Fund (CJHIF). AIM will begin with completing medical claims audits for claims administered by Aetna. The claim audit being performed will determine Aetna's claim processing and financial accuracy of medical claims. AIM will also perform an Operation Review. Aim will perform an in-depth evaluation of the controls employed by the Aetna to ensure quality administration. **See Appendix.**

Carrier Appeals:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
03/12/2024	Aetna/Medical	CJHIF 2024-03-01	Medicare COB	Upheld	04/02/2024

03/15/2024	Aetna/Medical	CJHIF 2024-03-02	Anesthesia	Upheld	03/15/2024
03/28/2024	Aetna/Medical	CJHIF 2024-03-03	Anesthesia	Upheld	03/28/2024
04/02/2024	Aetna/Medical	CJHIF 2024-04-01	Anesthesia	Upheld	04/04/2024
04/08/2024	Aetna/Medical	CJHIF 2024-04-02	Anesthesia	Upheld	04/10/2024
04/09/2024	Aetna/Medical	CJHIF 2024-04-03	Anesthesia	Upheld	04/10/2024
04/24/2024	Aetna/Medical	CJHIF 2024-04-04	Allowed amount for surgery	Under Review	N/A

IRO Submissions: None

TREASURER – Fund Treasurer Steve Mayer stated that the bills are in the agenda and the Resolution is in the consent agenda.

ATTORNEY: No report.

AETNA: Mr. Silverstein reviewed the claims for the months of February and March 2024. The High claimant report showed 5 claims for both months above \$50,000. In addition, he said that Hackensack – Meridian contract negotiations continue but they are asking for double digit increases. There is a possibility that letters will go out to the membership 30 days before termination. In response to Chair Nolan, Mr. Silverstein said that this Fund will be deeply disrupted, but there would be an adequate amount of other hospitals and admitting privileges in other facilities. Program Manager said this impacts 13 hospitals. A list was sent to our broker partners.

AMERIHEALTH: Ms. Strain reviewed the claims for the month of April 2024. There were no high claimants for April.

EXPRESS SCRIPTS: Ms. Patel reviewed the monthly utilization report for Q1 2024. There were also additional reports that were presented showing top drugs and indications

DELTA DENTAL: Crista O'Donnell reviewed the Claim distribution by type of procedure.

MOTION TO APPROVE THE RESOLUTIONS LISTED IN THE CONSENT AGENDA AS DISCUSSED:

Resolution 19-24: Approving 2023 Annual Audit
Resolution 20-24: Closing Fund Year 2022
Resolution 21-24: Approving Competitive Contracting RFPs
Resolution 22-24: Approving New Member – Seaside Park
Resolution 23-24: Approving Wellness Grant Applications
Resolution 24-24 Approving GLP-1 Prescription Program
Resolution 25-24: Approval of the April and May Bills Lists

MOTION:	Commissioner Valentino
SECOND:	Commissioner Dempsey
ROLL CALL:	5 Ayes, 0 Nays

OLD BUSINESS: None

NEW BUSINESS: None.

PUBLIC COMMENT: None.

MOTION TO ADJOURN MEETING:

MOTION:	Commissioner Valentino
SECOND:	Commissioner Brach

VOTE:

All in Favor

MEETING ADJOURNED: 2:03 pm

Minutes Prepared by: Emily Koval, Assisting Secretary

Next Meeting: May 15, 2024 1:30 pm, Zoom Meeting

APPENDIX II

Central Jersey Health Insurance Fund 2023 Operations Review and Medical Claims Audit

A health care claims audit is designed to assess whether claims are being adjudicated correctly, in accordance with the provisions of the plan of benefits, and paid only on behalf of eligible participants as determined by the provisions of the plan. Best practice is to look beyond just the claims and to identify operational or administrative issues that may lead to broader claims processing and service issues, allowing for real-world recommendations for resolution.

AIM will perform an Operations Review of Aetna, which is an in-depth evaluation of the controls employed by the administrator to ensure quality administration.

- In an Operations Review (OR), a comprehensive Request for Information (RFI) is prepared and sent to Aetna in advance of the scheduled OR meeting.
- During the OR, interviews are conducted with key management and operations personnel to review Aetna's responses, procedures and methodologies.
- The OR encompasses such areas as system capabilities, staffing levels and turnover, performance standards, quality assurance for claim processing and customer service, Aetna's actual performance vs. client-specific and/or industry standards for accuracy, timeliness of claims adjudication, reporting capabilities, coordination with other administrative areas/vendors, and cost-management activities such as overpayment recovery, pricing controls and TPL investigations.
- Findings are compared to industry best practices.
- An OR can identify weaknesses in administrative controls that lead to poor performance.

In conjunction with the Operations Review, a medical claims audit will also be conducted on the administration by Aetna for the HIF employee medical plan. The medical claims audit will be conducted on a sample of claims finalized during the identified audit period. The audit will assess whether claims are being adjudicated correctly, in accordance with the provisions of the HIF plan of benefits and paid on behalf of eligible participants as determined by the provisions of the plan.

The purpose of the audit is to provide an assessment of Aetna's overall claims processing and financial accuracy performance during the audit period versus industry standards and applicable contractual standards.

Claim Audit Methodology - The principal objective of the claims audit will be to determine Aetna's claim processing accuracy and financial accuracy on medical claims. The financial accuracy calculation will identify the financial impact (and potential recoveries) for payment errors. In addition, a critical component of the audit process will be to identify the causes of errors. AIM's audit findings and recommendations will specifically identify these causes and recommend solutions that can help Aetna improve its claims administration and eliminate the kinds of errors identified through the audit process.

APPENDIX III

Date: December 5, 2023

To: CJHIF Fund Commissioners

Re: 2024 Wellness Grant Program

For the seventh year in a row, The Central Jersey Health Insurance Fund is excited to offer an opportunity for member entities to apply for a health and wellness grant for eligible employees. The Fund has budgeted \$125,000 for such projects.

To allocate the funds appropriately, each entity must select the grant level that will best meet their needs and which will also allow them to develop and sustain an employee wellness program OR opt out of the program entirely.

The following programs are available:

Option 1	Comprehensive Biometric Screenings – onsite finger stick test for blood glucose, cholesterol, in addition to blood pressure and body mass index. Includes aggregate reporting if stated minimum participation is met.
Option 2	Comprehensive Biometric Screenings - onsite finger stick test for blood glucose, cholesterol, in addition to blood pressure and body mass index. Includes aggregate reporting if stated minimum participation is met. Wellness Days – 2-3 times a year, the district may offer educational seminars, healthy cooking instructions or light fitness classes to employees.
Option 3	Design Your Own Program – This option will allow the member to continue with an existing program or design a new wellness plan for this Fund Year. Please include a detailed description of the plan, timeframes and associated costs that the district will be responsible for and total grant money requested by the Fund. Complete the attached form.

Each option must include a Wellness Champion/Leader to encourage engagement and facilitate the program. Please submit who this representative and an optional stipend for this position.

The Township/Borough of _____ Aberdeen _____ selects Option

_____ and is willing to commit to management resources and will be 5 financially responsible for any wellness expenses outside of the program, including employee incentives. The municipality will also form a Committee that must meet at least twice a year, lead by a Wellness Champion/Leader that has the ability to lead and sustain the program after the grant is expended. The Municipality elects

Angela Morin, Joe Setticase, Taylor Sheridan, Jason Veres to be its Wellness Champion/Leader who will be paid \$350-\$700 for the year

OR

The Municipality Opts out of the Central Jersey Health Insurance Fund Wellness Grant Program entirely.

Applications will be accepted through June 30, 2023. Please send all completed and signed applications to: HIFAdmin@permainc.com Agreed to and authorized by:

Name:	Angela Morin
Title:	Finance Director
Date:	Apr. 24, 2024

Municipality name: Township of Aberdeen **Option 3:**

Build your own – Please describe below or attach your desired program.

Continuing our wellness program with healthy luncheon kickoff, various gym and 5k runs challenges,

Detailed description of program	farm fresh program was a great success last year, introducing Wellable challenge this year and a health fair in the fall. Looking to incorporate biometric screening this year, and additional equipment for the gym
Location(s) where program will be held	Mostly on town premises
Implementation timeline	Beginning March through December
Other requirements	
Cost	\$25,585.00

Agreed to and authorized by:

Name:	Angela Morin
Title:	Finance Director
Date:	Jun. 10, 2024

