



AGENDA AND REPORTS

MAY 21, 2025

1:30 PM

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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: MAY 21, 2025
1:30 PM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

FLAG SALUTE

ROLL CALL OF 2025 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
Bryan Dempsey, Executive Committee – Spring Lake Borough
Peter O'Reilly, Executive Committee – Lakewood Township
James Gant, Executive Committee – Red Bank
Jason Gonter, Executive Committee Alternate – West Long Branch Township

APPROVAL OF MINUTES: March 19, 2025, Open

Appendix I

CORRESPONDENCE – None

REPORTS:

EXECUTIVE DIRECTOR (PERMA)

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PROGRAM MANAGER– (Conner Strong & Buckelew)

Monthly Report.....Page 14

TREASURER – (Stephen Mayer)

March Supplement, April, and May 2025 Voucher List.....Page 18

Confirmation of Claims Paid/Certification of Transfers

Ratification of Treasurers Report

ATTORNEY – (John C. Sahradnik, Esq.)

Monthly Report Verbal

NETWORK & THIRD-PARTY ADMINISTRATOR – (Aetna)

Monthly Report.....Page 26

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 38

Resolution 20-25: Approving 2024 Annual Audit **Page 39**

Resolution 21-25: Closing Fund Year 2023..... **Page 42**

Resolution 22-25: Out of Network Revision **Page 43**

Resolution 23-25: Adopting 2025 Wellness Grant Programs..... **Page 44**

Resolution 24-25: Offering New Membership **Page 45**

Resolution 25-25: March Supplement, April, and May 2025 Bills List **Page 46**

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 21, 2025

FINANCE AND CONTRACTS

PRO FORMA REPORTS

- **Fast Track Financial Report** – as of February 28, 2025 (page 9)

AUDITOR AND ACTUARY YEAR-END REPORTS

A draft of the Fund Year 2024 Audit, performed by the Fund auditor, Mercadian, is attached. A representative from Mercadian will be in attendance to present their findings. Should there be any comments, PERMA will be prepared to address. The Finance Committee reviewed this prior to the meeting and is recommending Resolution 20-25, the approval 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 2023. All IBNR has been expensed and any outstanding payable or receivable will be addressed prior to closure.

Resolution 21-25 allows for closing this year.

2024 NEW MEMBER PHARMACY REBATES

In reviewing Year End financials, PERMA discovered an error with the Express Scripts rebate implementation on the new 2024 groups, therefore the Fund did not receive the guaranteed rebates for those groups. Appendix III contains a memo from Express Scripts detailing the timeline and estimated rebates.

We will be updating the year-end financials when the final number of the rebate impact is provided.

OUT OF NETWORK PROVIDERS

There is a recognizable increase in costs associated with varicose vein treatment through the Health Insurance Funds statewide. It appears that out-of-network providers are targeting rich public entity health plans with high out-of-network reimbursements levels.

The policy that the Finance Committee reviewed and is recommending is the implementation of “capped,” payments for CPT Codes 36465, 36475, and 36476 at the highest in-network regional negotiated rate, which is roughly 80% lower than what is being paid to out-of-network providers. There is one entity where these claims have been noticed and want to proactively cap these CPT codes to avoid the provider going to other entities in the Fund.

The Fund Attorney reviewed the resolution and policy and agreed that it is reasonable and justified under the circumstance. We are recommending an effective date for claims incurred on or after August 1, 2025. Resolution 22-25 is included in your agenda for consideration, formalizing this policy.

2025 WELLNESS GRANT APPLICATIONS

Applications for a 2025 wellness grant were emailed to the membership last month. The total budget is \$150,000 for all medical members.

We've received two responses for Wellness grants through the Fund, Monmouth County Bayshore Outfall Authority and Montgomery Township. The applications have similar programs and initiatives which have been previously approved.

1. **Monmouth County Bayshore Outfall Authority** – monthly incentives for walking challenges and gym attendance – request for \$3,600
2. **Montgomery Township** – wellness program that includes biometric screenings, personalized health coaching, various wellness events - request for \$10,850

Resolution 23-25 approves these grants. The due date is **June 30, 2025**, for all members that are interested. The application has been sent out, if you need an extra copy, please reach out to HIFadmin@permainc.com.

FUND TREASURER

The Fund Treasurer has notified the Fund that he will be stepping down. He has offered to continue with accounts receivable and the CIR reports until a replacement has been made. The contracts committee will be provided with available candidates and will likely have a recommendation at the next meeting. In the interest of time and the size of the contract, the contracts committee may want to consider handling this contract outside the Fair and Open and RFP as usual for 2027. With the amount of income and claim wires, the Fund may also want to consider adding a deputy treasurer to back up the Treasurer. A full report will be provided in July.

***Motion:** Allow PERMA to go out for quotes for Fund Treasurer services.*

NEW MEMBERSHIP – WASHINGTON TWP – MORRIS COUNTY

The Township of Washington, located in Morris County, has requested a quote from the Fund and has accepted. The details of the prospect are below. Please note that a Morris County entity would typically go to the North Jersey HIF. Due to significant growth over the past year and higher claims trends, particularly in the Northern area of the State, this Fund instituted a temporary growth moratorium. Washington Township is running well in the SHBP and has been underwritten with significant margin with the intent to build surplus. The CJHIF has not had a lot of growth in the past 12 months, and this could be a good opportunity.

With that said, the Township would sign a 3-year Indemnity and Trust agreement with the CJHIF and would not consider another Fund during its membership. A resolution approving membership is included in consent.

New Member Overview	
Fund	Central Jersey Health Insurance Fund
Entity	Washington Township
County	Morris County
Effective Date	7/1/2025-6/30/2026
Lines of Coverage	Medical and Prescription
Eligible Employees	79
Retiree Coverage	Under 65 and Medicare Advantage Retiree Coverage
Current Arrangement	State Health Benefits
Actuary Certification	Yes: Standard Underwriting Methodolgy
Broker	Brown & Brown
Broker Fee	3.5%
Run Out Claims	State Health Benefits/Horizon
Member approval?	All required resolutions passed
Special Requests	Out of typical terratory

FINANCE COMMITTEE - ACH PAYMENTS

As a follow-up from the last meeting, the Fund Treasurer confirmed there is a small number of groups who consistently make wired invoice payments. The Finance Committee reviewed this data and recommended no changes to the policy but does encourage wire transfers for monthly payments.

PERMA, LLC NOTICE AND DISCLOSURE

Pursuant to N.J.A.C Title 11, Chapter 15, Subchapter 5, PERMA, LLC (“PERMA”), as administrator of the Central Jersey Health Insurance Fund (“the Fund”), and its employees, officers and directors hereby provide notice that they have direct and indirect financial interests in Conner Strong & Buckelew Companies, LLC, which is a servicing organization for the Fund.

MEL/MRHIF EDUCATIONAL SEMINAR PRESENTATION

At the April 25th MEL/MRHIF Educational Seminar, Conner Strong & Buckelew’s Joe DiBella, Executive Partner and National Employee Benefits Practice Leader presented “Issues and Trends in Group Health Benefits.” The presentation reviews some of the major challenges regarding cost and utilization drivers the Health Benefits world is dealing with. This presentation was sent as an attachment to the agenda.

As a follow up, Conner Strong & Buckelew will be hosting a second webinar presentation for our HIF broker partners and Commissioners on June 5th at 2:00pm. The discussion will take a deeper focus on the newer, material cost drivers for GLP-1 medications and the rising use of out-of-network providers experienced by the public sector. The speakers include Joe DiBella, Executive Partner and National Benefits Practice Leader and Tammy Brown, Executive Partner and HIF Business Leader.

A flyer/invitation is in Appendix III, where you can get more details and registration information.

I&T 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 three years. Below is a list of members who have expired agreements. Please reach out to HIFadmin@permainc.com for a blank form to be executed. This list was last updated on May 5th, 2025.

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
Matawan	12/31/2023
Bedminster Township	12/31/2023
Hamilton Twp	12/31/2024
Aberdeen	12/31/2024
Manasquan River Regional Sewerage Authority	12/31/2024
Manasquan	12/31/2024
Montgomery Township	12/31/2024
Red Bank	12/31/2024
Oceanport	12/31/2024
South River	12/31/2024
Seaside Park Borough	12/31/2024

CENTRAL JERSEY HEALTH INSURANCE FUND						
FINANCIAL FAST TRACK REPORT						
			AS OF	February 28, 2025		
			THIS MONTH	YTD CHANGE	PRIOR YEAR END	FUND BALANCE
1.	UNDERWRITING INCOME		5,294,254	10,671,666	970,527,549	981,199,215
2.	CLAIM EXPENSES					
	Paid Claims		4,934,212	9,466,874	801,403,345	810,870,219
	IBNR		(135,589)	341,412	3,986,278	4,327,691
	Less Specific Excess		(14,381)	(14,381)	(21,764,468)	(21,778,849)
	Less Aggregate Excess		-	-	(1,000,000)	(1,000,000)
	TOTAL CLAIMS		4,784,243	9,793,905	782,625,156	792,419,060
3.	EXPENSES					
	MA & HMO Premiums		444,818	894,436	32,433,949	33,328,385
	Excess Premiums		209,779	420,269	43,433,470	43,853,739
	Administrative		322,669	645,756	56,732,554	57,378,310
	TOTAL EXPENSES		977,266	1,960,461	132,599,973	134,560,434
4.	UNDERWRITING PROFIT/(LOSS) (1-2-3)		(467,254)	(1,082,700)	55,302,421	54,219,721
5.	INVESTMENT INCOME		8,957	19,358	4,323,181	4,342,540
6.	DIVIDEND INCOME		0	0	8,232,890	8,232,890
7.	STATUTORY PROFIT/(LOSS) (4+5+6)		(458,297)	(1,063,341)	67,858,492	66,795,150
8.	DIVIDEND		0	0	61,010,348	61,010,348
9.	Transferred Surplus		0	0		0
	STATUTORY SURPLUS (7-8+9)		(458,297)	(1,063,341)	6,848,144	5,784,803
SURPLUS (DEFICITS) BY FUND YEAR						
Closed	Surplus		(15,617)	(8,660)	10,117,176	10,108,516
	Cash		(14,564)	(7,509)	9,956,419	9,948,910
2023	Surplus		(174,782)	(249,259)	(2,160,678)	(2,409,937)
	Cash		(174,782)	(249,259)	(2,761,601)	(3,010,860)
2024	Surplus		(16,219)	(114,560)	(7,051,165)	(7,165,725)
	Cash		(143,992)	(1,088,463)	(6,589,940)	(7,678,403)
LAKEWOOD	Surplus		227,642	138,661	5,942,811	6,081,473
	Cash		5,398,711	(821,732)	6,220,443	5,398,711
2025	Surplus		(479,321)	(829,524)		(829,524)
	Cash		221,625	(391,088)		(391,088)
	TOTAL SURPLUS (DEFICITS)		(458,297)	(1,063,341)	6,848,144	5,784,802
	TOTAL CASH		5,286,998	(2,558,050)	6,825,321	4,267,271
CLAIM ANALYSIS BY FUND YEAR						
	TOTAL CLOSED YEAR CLAIMS		20,406	19,050	601,887,313	601,906,363
	FUND YEAR 2023					
	Paid Claims		175,424	250,650	40,578,585	40,829,235
	IBNR		0	0	0	0
	Less Specific Excess		0	0	(867,937)	(867,937)
	Less Aggregate Excess		0	0	0	0
	TOTAL FY 2023 CLAIMS		175,424	250,650	39,710,648	39,961,298
	FUND YEAR 2024					
	Paid Claims		680,050	2,176,208	42,206,881	44,383,088
	IBNR		(630,167)	(2,027,494)	2,739,858	712,364
	Less Specific Excess		(33,443)	(33,443)	(124,196)	(157,639)
	Less Aggregate Excess		0	0	0	0
	TOTAL FY 2024 CLAIMS		16,440	115,271	44,822,543	44,937,813
	LAKEWOOD					
	Paid Claims		1,212,185	2,547,397	0	2,547,397
	IBNR		(50,917)	106,372	99,306,787	99,413,159
	Less Specific Excess		19,062	19,062	1,246,420	1,265,483
	Less Aggregate Excess		0	0	(4,348,556)	(4,348,556)
	TOTAL LAKEWOOD CLAIMS		1,180,330	2,672,831	96,204,651	98,877,482
	FUND YEAR 2025					
	Paid Claims		2,846,148	4,473,569		4,473,569
	IBNR		545,495	2,262,534		2,262,534
	Less Specific Excess		0	0		0
	Less Aggregate Excess		0	0		0
	TOTAL FY 2025 CLAIMS		3,391,643	6,736,103		6,736,103
	COMBINED TOTAL CLAIMS		4,784,243	9,793,905	782,625,154	792,419,059

CENTRAL JERSEY HEALTH INSURANCE FUND			
RATIOS			
		FY2025	
INDICES	2024	JAN	FEB
Cash Position	6,825,321	\$ 5,287,641	\$ 4,267,271
IBNR	3,986,278	\$ 4,463,280	\$ 4,327,691
Assets	11,157,317	\$ 11,048,728	\$ 10,456,404
Liabilities	4,309,178	\$ 4,805,634	\$ 4,671,606
Surplus	6,848,139	\$ 6,243,094	\$ 5,784,798
Claims Paid -- Month	4,330,758	\$ 4,533,919	\$ 4,935,470
Claims Budget -- Month	3,854,188	\$ 4,424,450	\$ 4,439,298
Claims Paid -- YTD	61,708,671	\$ 4,533,919	\$ 9,469,390
Claims Budget -- YTD	54,171,047	\$ 4,424,450	\$ 8,863,748
RATIOS			
Cash Position to Claims Paid	1.58	1.17	0.86
Claims Paid to Claims Budget -- Month	1.12	1.02	1.11
Claims Paid to Claims Budget -- YTD	1.14	1.02	1.07
Cash Position to IBNR	1.71	1.18	0.99
Assets to Liabilities	2.59	2.30	2.24
Surplus as Months of Claims	1.78	1.41	1.30
IBNR to Claims Budget -- Month	1.03	1.01	0.97

Central Jersey Health Insurance Fund

2025 Budget Report

AS OF FEBRUARY 28, 2025

				Cumulative Expensed	\$ Variance	% Variance
Expected Losses	Cumulative	Annual	Latest Filed			
Medical Claims AmeriHealth 12/31 Renewal	0	0	20,595			
Medical Claims AmeriHealth 6/30 Renewal	54,406	163,218	381,389			
Medical Claims Aetna 12/31 Renewal	4,548,441	27,315,930	25,708,509			
Medical Claims Aetna 6/30 Renewal	75,670	226,340	504,115			
Subtotal Medical Claims	4,678,517	27,705,488	26,614,608	4,821,667	(135,603)	-3%
Prescription Claims 12/31 Renewal	1,432,920	8,593,120	7,981,434			
Prescription Claims 6/30 Renewal	28,358	84,938	184,591			
Less Rx Rebates	(438,383)	(2,603,415)	(2,449,808)			
Subtotal Prescription Claims	1,022,895	6,074,643	5,716,217	1,611,543	(588,648)	-58%
Dental Claims 12/31 Renewal	316,307	1,898,667	1,868,108			
Dental Claims 6/30 Renewal	0	0	0			
Subtotal Dental Claims	316,307	1,898,667	1,868,108	302,893	13,414	4%
Vision Claims	7,547	45,583	37,407	Included in Medical Claims		
Lakewood SIR Claims						
Medical	2,095,674	12,506,716	13,740,924	2,145,022	(49,348)	-2%
Prescription	742,808	4,431,350	4,623,988	527,809	214,999	29%
Subtotal Claims	8,863,748	52,662,447	52,601,252	9,408,934	(545,186)	-6%
Medicare Advantage / EGWP	779,328	4,727,074	4,453,224	893,697	1,434	0%
Medicare Advantage - Rx	115,802	713,246	805,219	Included in Medicare Advantage / EGWP		
DMO Premiums	771	4,887	3,867	739	32	4%
Reinsurance						
Specific	178,192	1,053,749	1,023,757			
Lakewood - ICH	241,439	1,440,462	1,498,099			
Subtotal Reinsurance	419,631	2,494,210	2,521,856	420,269	(639)	0%
Loss Fund Contingency	39,137	234,821	132,134	0	39,137	100%
Total Loss Fund	10,218,417	60,836,686	60,517,552	10,723,639	(505,222)	-5%
Expenses						
Legal	6,193	37,161	37,161	6,072	121	2%
Treasurer	2,210	13,260	13,260	2,166	44	2%
Administrator	85,042	508,959	497,886	84,695	347	0%
Program Manager	317,535	1,911,504	1,810,853	320,085	-	0%
Actuary	2,873	17,238	17,238	2,873	-	0%
Auditor	3,570	21,420	21,420	3,570	-	0%
TPA - Aetna	144,102	858,767	888,077	145,881	(272)	0%
TPA - AmeriHealth	1,506	4,519	9,504	Included above in TPA - Aetna		
Plan Documents	2,550	15,300	15,300	Included in Program Manager		
Dental TPA	14,884	89,499	88,040	14,866	18	0%
Wellness	25,000	150,000	150,000	25,000	-	0%
Affordable Care Act	1,818	10,776	10,674	1,818	(0)	0%
A4 Retiree Surcharge	2,517	7,538	14,354	2,516	1	0%
Claims Audit	6,667	40,000	40,000	6,666	1	0%
Misc/Cont	3,531	21,185	21,185	342	3,189	90%
Total Expenses	619,998	3,707,124	3,634,951	616,551	3,447	1%
Total Budget	10,838,414	64,543,810	64,152,504	11,340,190	(501,775)	-5%

Central Jersey Health Insurance Fund

CONSOLIDATED BALANCE SHEET

AS OF FEBRUARY 28, 2025

BY FUND YEAR

	CJ HIF 2025	CJ HIF 2024	CJ HIF 2023	CJ HIF 2020	CLOSED YEAR	LAKEWOOD	FUND BALANCE
ASSETS							
Cash & Cash Equivalents	(391,088)	(7,678,403)	(3,010,860)	-	9,948,910	5,398,711	4,267,271
Assesstments Receivable (Prepaid)	1,378,719	549,593	610	-	332,619	1,417,530	3,679,071
Interest Receivable	-	-	-	-	-	-	-
Specific Excess Receivable	-	157,639	492,937	-	-	283,105	933,682
Aggregate Excess Receivable	-	-	-	-	-	-	-
Dividend Receivable	-	-	-	-	-	-	-
Prepaid Admin Fees	1,437	-	-	-	-	-	1,437
Other Assets	483,512	649,136	107,376	-	-	334,918	1,574,943
Total Assets	1,472,580	(6,322,034)	(2,409,937)	-	10,281,530	7,434,265	10,456,404
LIABILITIES							
Accounts Payable	-	-	-	-	-	-	-
IBNR Reserve	2,262,534	712,364	-	-	-	1,352,792	4,327,691
A4 Retiree Surcharge	2,516	10,333	-	-	-	-	12,849
Dividends Payable	-	-	-	-	-	-	-
Retained Dividends	-	-	-	-	173,019	-	173,019
Accrued/Other Liabilities	37,054	120,994	-	-	-	-	158,048
Total Liabilities	2,302,104	843,691	-	-	173,019	1,352,792	4,671,606
EQUITY							
Surplus / (Deficit)	(829,524)	(7,165,725)	(2,409,937)	-	10,108,511	6,081,473	5,784,798
Total Equity	(829,524)	(7,165,725)	(2,409,937)	-	10,108,511	6,081,473	5,784,798
Total Liabilities & Equity	1,472,580	(6,322,034)	(2,409,937)	-	10,281,530	7,434,265	10,456,404
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.

CENTRAL JERSEY HEALTH INSURANCE FUND
YEAR: 2025

<u>Monthly Items</u>	<u>Filing Status</u>
Budget	Filed
Assessments	Filed
Actuarial Certification	Filed
Reinsurance Policies	Filed
Fund Commissioners	Be Filed upon Re-organization
Fund Officers	Be Filed upon Re-organization
Renewal Resolutions	Be Filed upon Re-organization
Indemnity and Trust	Be Filed upon Re-organization
New Members	Filed as New Members are approved
Withdrawals	Filed as Members Withdrawal
Risk Management Plan and By Laws	Be Filed upon Re-organization
Cash Management Plan	Be Filed upon Re-organization
Unaudited Financials	Filed through Q3 2024
Annual Audit	12/31/2023 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	Be Filed upon Re-organization
Benefit Changes	N/A

CENTRAL JERSEY REGIONAL HEALTH INSURANCE FUND

Program Manager

May 2025

Program Manager: PERMA

Operational Updates:

Eligibility/Enrollment:

Please direct any eligibility, enrollment, or system related questions to our dedicated Client Service Team member:

- Marlene Robinson, mrobinson@permainc.com, 856-552-4818
- Sheena Bailey, sbailey@permainc.com, 856-446-9283

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.

Notice and Disclosure

Pursuant to N.J.A.C Title 11, Chapter 15, Subchapter 5, Conner Strong & Buckelew Companies, LLC, as a servicing organization of the Central Jersey Health Insurance Fund (the "Fund") and its employees, officers and directors hereby provide notice that they have direct and indirect financial interests in PERMA, LLC, which is the Administrator for the Fund.

Coverage Updates:

Express Scripts:

2025 National Preferred Formulary (NPF) and SaveOn - Effective 7/1/25

Brokers were sent the updated 2025 Formulary and Exclusions lists effective July 1, 2025, on May 6, 2025. There are 10 members in CJHIF impacted by the formulary change. Please reference the appendix for the updated lists. Please note the following:

NPF: NPF Exclusions List, please note the following:

- **Humalog** - excluded for members with a new prescription as of 1/1/25, members currently taking the drug will be excluded effective 1/1/26
 - Members should share the covered preferred alternatives provided in the list with their providers
 - The number of impacted members will be provided later in 2025
- **Humira** - excluded for members with a new prescription as of 1/1/25, members currently taking the drug will be excluded effective 7/1/25

- Members should share the covered preferred alternatives provided in the list with their providers
- Impacted members (7) will be notified by ESI. The notification will include covered preferred alternatives under the NPF

SaveOn (applies to all members) – Effective 7/1/25

Brokers were sent the updated 2025 SaveOn List effective July 1, 2025, on May 7, 2025. Please note the following:

- Drugs highlighted in green (21) were added to the list effective July 1, 2025
- Drugs highlighted in red (5) were removed from the list effective July 1, 2025
 - There were no CJHIF members impacted by the drugs removed from the list

4Q2024 SaveOn Savings (1/1/2024 through 12/31/24)

In 4Q2024, the Central New Jersey Health Insurance Fund saved \$369,082 for members enrolled in SaveOn, an additional \$69,912 in savings from 3Q2024. There are currently 63 participants in the program, an increase of 6 members compared to 3Q2024. In 2024, CJHIF Fund members who used SaveOn saved a total of \$488 in copays. The average savings per prescription to date was \$974. See Appendix for the full report.

Top Therapeutic 5 Categories:

- Inflammatory Conditions
 - 25 members, totaling \$119,525 in savings (no change in members from the prior period)
- Asthma & Allergy
 - 17 members, totaling \$99,315 in savings (increase of 1 member from the prior period)
- Cancer
 - 9 members, totaling \$29,949 in savings (increase of 3 members from the prior period)
- Multiple Sclerosis
 - 4 members, totaling \$12,367 in savings (no change in members from the prior period)
- Miscellaneous Diseases
 - 1 member, totaling \$18,460 in savings (no change in members or claims spend from the prior period)

Encircle Program (GLP-1 Weight Loss)

Effective September 1, 2024:

- Members with new prescriptions, including renewal prescriptions for expired prior authorizations (PA), will need to meet the following criteria to be approved for a GLP-1 weight loss medication:
 - BMI ≥ 32 OR
 - BMI between $27 \leq 32$ WITH 2 or more documented comorbidities
- Members with an active approved PA prior to 9/1/2024 will be grandfathered

- Upon renewal of their PA, members will need to meet the above BMI requirements to be considered for approval
- PA renewals will need to include documentation to support the above BMI requirements for all members, regardless of members have been approved in the past.

Effective January 1, 2025:

Members who have an approved PA (active and new) will need to meet the following guidelines:

- 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 requirements outlined above, 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.

2025 LEGISLATIVE REVIEW

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 ensure that 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.

Appeals:

Carrier Appeals

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
1/29/25	Medical/ Aetna	CJHIF 2025 01 03	Skilled Nursing	Under Review	Upheld
04/04/25	Medical/ Aetna	CJHIF 2025 04 01	Laboratory Services	Under Review	Upheld

IRO Submissions:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
1/29/25	Medical/ Aetna	CJHIF 2025 01 03	Skilled Nursing	Under Review	
04/04/25	Medical/ Aetna	CJHIF 2025 04 01	Laboratory Services	Under Review	

**CENTRAL JERSEY HEALTH INSURANCE FUND
SUPPLEMENTAL BILLS LIST**

Resolution No.

MARCH 2025

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 CLOSED

<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
TRUST ACCOUNT OF MAZIE SLATER KATZ	SETTLEMENT- NORTHEAST SURGICARE 3/25	13,000.00
		13,000.00
	Total Payments FY CLOSED	13,000.00
	TOTAL PAYMENTS ALL FUND YEARS	13,000.00

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

Resolution No.

APRIL 2025

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 2025

<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
AETNA LIFE INSURANCE COMPANY	VOID AND REISSUE	-212.94
AETNA LIFE INSURANCE COMPANY	VOID AND REISSUE	-71,686.02
		-71,898.96
AMERIHEALTH ADMINISTRATORS	VOID AND REISSUE	25.00
AMERIHEALTH ADMINISTRATORS	VOID AND REISSUE	-817.80
		-792.80
AETNA HEALTH MANAGEMENT LLC	MEDICARE ADVANTAGE 04/25	452,447.56
		452,447.56
FLAGSHIP DENTAL PLANS	PLUMSTEAD- GRP. 1526 INV 155876 04/25	119.39
FLAGSHIP DENTAL PLANS	MONTG. TWP 04/25 GROUP 1343-155742	287.39
		406.78
AETNA LIFE INSURANCE COMPANY	VISION TPA 04/25	210.21
AETNA LIFE INSURANCE COMPANY	VISION TPA 02/25	212.94
AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 02/25	71,686.02
AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 04/25	71,725.56
		143,834.73
AMERIHEALTH ADMINISTRATORS	WELLNESS CREDIT 04/25	-23.75
AMERIHEALTH ADMINISTRATORS	WELLNESS CREDIT 02/25	-25.00
AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 02/25	817.80
AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 04/25	776.91
		1,545.96
INSPIRA FINANCIAL HEALTH, INC	OCEANPORT HSA 03/25 143010-2051592	126.00
INSPIRA FINANCIAL HEALTH, INC	MRRSA HSA FEE 03/25142292-2051914	18.00
		144.00
DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 04/25	7,427.80
		7,427.80
PERMA RISK MANAGEMENT SERVICES	RETIREE FIRST -0INV 05012025 04/25	14,436.00
PERMA RISK MANAGEMENT SERVICES	RETIREE FIRST -INV 04012025 04/25	14,436.00
PERMA RISK MANAGEMENT SERVICES	ADMIN FEES 04/25	42,405.24
PERMA RISK MANAGEMENT SERVICES	POSTAGE 03/25	84.25
		71,361.49
ACTUARIAL SOLUTIONS, LLC	ACTUARY FEES Q2 2025	4,310.00
		4,310.00
BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEES 04/25	3,036.00
		3,036.00
STEPHEN MAYER	TREASURER FEE 04/25	1,105.00
		1,105.00

CONNER STRONG & BUCKELEW	PLAN DOCS 04/25	1,275.00
CONNER STRONG & BUCKELEW	NEW MEMBER COMMISSION 04/25	70,004.54
CONNER STRONG & BUCKELEW	PROGRAM MANAGER 04/25	81,685.54
CONNER STRONG & BUCKELEW	DENTAL COMMISSION 04/25	388.91
CONNER STRONG & BUCKELEW	FUND COORDINATOR 04/25	5,765.06
CONNER STRONG & BUCKELEW	BAYSHORE REG. IMPLEMENT FEE AS OF 1/25	2,000.00
CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 04/25	1,794.85
		162,913.90
ACCESS	INV 11420430 DEPT 420 02/28/25	111.16
		111.16
GANNETT NEW YORK-NJ LOCALIQ	A# 1120753 INV 7011965-11160697 3/27/25	113.75
GANNETT NEW YORK-NJ LOCALIQ	A# 1120753 INV 7011965-11156658 3/26/25	44.68
GANNETT NEW YORK-NJ LOCALIQ	A# 1120753 INV 7011965-11160671 3/27/25	129.50
		287.93
THE CANNING GROUP LLC	QPA INV 2025-04 04/25	166.67
		166.67
MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 04/25	89,163.35
		89,163.35
SYMETRA FINANCIAL	SPECIFIC REINSURANCE FEE-SINGLE 04/25	36,766.28
SYMETRA FINANCIAL	AGGREGATE 04/25	4,073.22
SYMETRA FINANCIAL	SPECIFIC REINSURANCE FEE-FAMILY 04/25	78,946.00
		119,785.50
	Total Payments FY 2025	985,356.07
	TOTAL PAYMENTS ALL FUND YEARS	985,356.07

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 HEALTH INSURANCE FUND

BILLS LIST

Resolution No.

MAY 2025

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 2024

<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
MONMOUTH COUNTY BAYSHORE	REIMB FOR WELLNESS INC. 6/1/24-12/31/24	280.00
		280.00
	Total Payments FY 2024	280.00

FUND YEAR 2025

<u>Vendor Name</u>	<u>Comment</u>	<u>Invoice Amount</u>
AETNA HEALTH MANAGEMENT LLC	MEDICARE ADVANTAGE 05/25	452,903.21
		452,903.21
FLAGSHIP DENTAL PLANS	PLUMSTEAD- GRP. 1526 INV 156332 5/1/25	119.39
FLAGSHIP DENTAL PLANS	MONTG. TWP 5/1/25 GROUP 1343-156198	287.39
		406.78
AETNA LIFE INSURANCE COMPANY	VISION TPA 05/25	210.21
AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 05/25	71,725.56
		71,935.77
AMERIHEALTH ADMINISTRATORS	WELLNESS CREDIT 05/25	-23.75
AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 05/25	776.91
		753.16
INSPIRA FINANCIAL HEALTH, INC	OCEANPORT HSA 04/25 143010-2061138	138.00
INSPIRA FINANCIAL HEALTH, INC	MRRSA HSA FEE 04.25 142292-2059332	18.00
		156.00
DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 05/25	7,459.40
		7,459.40
PERMA RISK MANAGEMENT SERVICES	RETIREE FIRST INV 06012025 05/25	14,016.00
PERMA RISK MANAGEMENT SERVICES	ADMIN FEE 05/25	42,308.95
PERMA RISK MANAGEMENT SERVICES	POSTAGE 04/25	110.99
		56,435.94
BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEES 05/25	3,036.00
		3,036.00

STEPHEN MAYER	TREASURER FEE 05/25	1,105.00 1,105.00
CONNER STRONG & BUCKELEW	PLAN DOCS 05/25	1,275.00
CONNER STRONG & BUCKELEW	NEW MEMBER COMMISSION 05/25	68,992.89
CONNER STRONG & BUCKELEW	PROGRAM MANAGER 05/25	81,803.64
CONNER STRONG & BUCKELEW	DENTAL COMMISSION 05/25	374.01
CONNER STRONG & BUCKELEW	FUND COORDINATOR 05/25	5,781.26
CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 05/25	1,794.90
		160,021.70
ACCESS	INV 11475326 DEPT 420 3/31/25	104.14 104.14
THE CANNING GROUP LLC	QPA INV 2025-05 05/25	166.67 166.67
MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 05/25	89,028.26 89,028.26
SYMETRA FINANCIAL	SPECIFIC REINSURANCE FEE-SINGLE 05/25	36,089.60
SYMETRA FINANCIAL	AGGREGATE 05/25	4,089.10
SYMETRA FINANCIAL	SPECIFIC REINSURANCE FEE-FAMILY 05/25	80,073.80
		120,252.50
	Total Payments FY 2025	963,764.53
	TOTAL PAYMENTS ALL FUND YEARS	964,044.53

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: 2025										
Month Ending: February										
	Medical	Dental	Rx	Vision	Reinsurance	DMO Premiums	Dividend Reserve	Admin	0	TOTAL
OPEN BALANCE	1,414,297.74	618,736.25	2,327,320.98	64,404.64	(297,989.23)	4,411.48	172,934.12	983,524.72	0.00	5,287,640.70
RECEIPTS										
Assessments	3,325,232.66	121,617.99	690,410.61	2,871.43	163,742.68	323.04	0.00	246,133.90	0.00	4,550,332.31
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Invest Pymnts	5,743.72	302.68	2,350.54	31.51	0.00	2.16	84.60	526.77	0.00	9,041.98
Invest Adj	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Subtotal Invest	5,743.72	302.68	2,350.54	31.51	0.00	2.16	84.60	526.77	0.00	9,041.98
Other *	313,202.00	0.00	317,375.42	0.00	0.00	0.00	0.00	0.00	0.00	630,577.42
TOTAL	3,644,178.38	121,920.67	1,010,136.57	2,902.94	163,742.68	325.20	84.60	246,660.67	0.00	5,189,951.71
EXPENSES										
Claims Transfers	3,795,120.99	128,860.39	1,311,988.30	0.00	0.00	0.00	0.00	0.00	0.00	5,235,969.68
Expenses	444,434.40	383.59	0.00	0.00	209,778.58	0.00	0.00	319,755.23	0.00	974,351.80
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	4,239,555.39	129,243.98	1,311,988.30	0.00	209,778.58	0.00	0.00	319,755.23	0.00	6,210,321.48
END BALANCE	818,920.73	611,412.94	2,025,469.25	67,307.58	(344,025.13)	4,736.68	173,018.72	910,430.16	0.00	4,267,270.93

Central Jersey Municipal Employee Benefits Fund									
Month		February							
Current Fund Year		2025							
		1.	2.	3.	4.	5.	6.	7.	8.
Policy Year	Coverage	Calc. Net Paid Thru Last Month	Monthly Net Paid February	Monthly Recoveries February	Calc. Net Paid Thru February	TPA Net Paid Thru February	Variance To Be Reconciled	Delinquent Unreconciled Variance From	Change This Month
2025	Medical	922,267.57	1,974,406.60	0.00	2,896,674.17	0.00	2,896,674.17	922,267.57	1,974,406.60
	Dental	99,766.14	121,503.19	0.00	221,269.33	0.00	221,269.33	99,766.14	121,503.19
	Rx	864,838.48	974,298.74	0.00	1,839,137.22	0.00	1,839,137.22	864,838.48	974,298.74
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	1,886,872.19	3,070,208.53	0.00	4,957,080.72	0.00	4,957,080.72	1,886,872.19	3,070,208.53
2024	Medical	1,461,385.81	672,736.71	0.00	2,134,122.52	0.00	2,134,122.52	1,461,385.81	672,736.71
	Dental	34,771.63	7,436.20	0.00	42,207.83	0.00	42,207.83	34,771.63	7,436.20
	Rx	0.00	(122.84)	0.00	(122.84)	0.00	(122.84)	0.00	(122.84)
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	1,496,157.44	680,050.07	0.00	2,176,207.51	0.00	2,176,207.51	1,496,157.44	680,050.07
2023	Medical	75,226.63	175,502.69	0.00	250,729.32	0.00	250,729.32	75,226.63	175,502.69
	Dental	0.00	(79.00)	0.00	(79.00)	0.00	(79.00)	0.00	(79.00)
	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	75,226.63	175,423.69	0.00	250,650.32	0.00	250,650.32	75,226.63	175,423.69
2022	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	(1,355.87)	20,405.93	0.00	19,050.06	0.00	19,050.06	(1,355.87)	20,405.93
	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	(1,355.87)	20,405.93	0.00	19,050.06	0.00	19,050.06	(1,355.87)	20,405.93
Lakewood	Medical	1,095,396.58	952,069.06	0.00	2,047,465.64	0.00	2,047,465.64	1,095,396.58	952,069.06
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	342,594.00	337,812.40	0.00	680,406.40	0.00	680,406.40	342,594.00	337,812.40
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	1,437,990.58	1,289,881.46	0.00	2,727,872.04	0.00	2,727,872.04	1,437,990.58	1,289,881.46
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	0.00	0.00	0.00	0.00	0.00
	TOTAL	4,894,890.97	5,235,969.68	0.00	10,130,860.65	0.00	10,130,860.65	4,894,890.97	5,235,969.68

SUMMARY OF CASH AND INVESTMENT INSTRUMENTS			
Central Jersey Municipal Employee Benefits Fund			
ALL FUND YEARS COMBINED			
CURRENT MONTH	February		
CURRENT FUND YEAR	2025		
		Description:	Ocean First Admin.
		ID Number:	
		Maturity (Yrs)	
		Purchase Yield:	
		TO TAL for All	
		Accts & instruments	
Opening Cash & Investment Balance	\$5,287,641.29		5,287,641.29
Opening Interest Accrual Balance	\$0.00		-
1	Interest Accrued and/or Interest Cost	\$0.00	\$0.00
2	Interest Accrued - discounted Instr.s	\$0.00	\$0.00
3	(Amortization and/or Interest Cost)	\$0.00	\$0.00
4	Accretion	\$0.00	\$0.00
5	Interest Paid - Cash Instr.s	\$9,041.96	\$9,041.96
6	Interest Paid - Term Instr.s	\$0.00	\$0.00
7	Realized Gain (Loss)	\$0.00	\$0.00
8	Net Investment Income	\$9,041.96	\$9,041.96
9	Deposits - Purchases	\$5,180,909.73	\$5,180,909.73
10	(Withdrawals - Sales)	-\$6,210,321.48	-\$6,210,321.48
Ending Cash & Investment Balance		\$4,267,271.50	\$4,267,271.50
Ending Interest Accrual Balance		\$0.00	\$0.00
Plus Outstanding Checks		\$1,011,895.75	\$1,011,895.75
(Less Deposits in Transit)		\$0.00	\$0.00
Balance per Bank		\$5,279,167.25	\$5,279,167.25



CENTRAL JERSEY HEALTH INSURANCE FUND

Monthly Claim Activity Report

MAY 21, 2024



CENTRAL JERSEY HEALTH INSURANCE FUND

	MEDICAL CLAIMS PAID 2024	# OF EES	PER EE	MEDICAL CLAIMS PAID 2025	# OF EES	PER EE
JANUARY	\$4,175,822	2,205	\$ 1,894	\$2,988,119	1,821	\$ 1,641
FEBRUARY	\$3,968,434	2,198	\$ 1,805	\$3,864,895	1,826	\$ 2,117
MARCH	\$3,663,556	2,193	\$ 1,671	\$4,488,913	1,822	\$ 2,464
APRIL	\$5,029,716	2,191	\$ 2,296			
MAY	\$3,785,711	2,305	\$ 1,642			
JUNE	\$4,376,641	2,301	\$ 1,902			
JULY	\$4,393,165	2,303	\$ 1,908			
AUGUST	\$4,600,973	2,297	\$ 2,003			
SEPTEMBER	\$3,900,226	2,293	\$ 1,701			
OCTOBER	\$4,925,529	1,782	\$ 2,764			
NOVEMBER	\$3,588,689	1,784	\$ 2,012			
DECEMBER	\$3,428,593	1,783	\$ 1,923			
TOTALS	\$49,837,056			\$11,341,927		
				2025 Average	1,823	\$ 2,074
				2024 Average	2,136	\$ 1,960

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: 03/01/2025 - 03/31/2025
Service Dates: 01/01/2011 - 03/31/2025
Line of Business: All

	Paid Amt	Diagnosis/Treatment
	\$624,546.36	GENETIC SUSCEPTIBILITY TO MALIGNANT NEOPLASM OF
	\$147,104.48	SEPSIS DUE TO METHICILLIN RESISTANT
	\$120,609.80	ENCOUNTER FOR ATTENTION TO COLOSTOMY
	\$110,137.89	GUILLAIN-BARRE SYNDROME
Total:	\$1,002,398.53	



**Medical Claims Paid :
January 2025 - March 2025**

Total Medical Paid per EE: **\$2,074**

Network Discounts

Inpatient: **60.0%**
Ambulatory: **65.2%**
Physician/Other: **67.8%**
TOTAL: 65.2%

Provider Network

% Admissions In-Network: **97.0%**
% Physician Office: **92.0%**

Aetna Book of Business:
Admissions 98.6%; Physician 90.0%

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

- Jersey Shore Medical
- Community Medical Center
- Ocean University Medical Center
- Monmouth Medical Center
- Riverview Medical Center

**Catastrophic Claim Impact
January 2025 – March 2025**

Number of Claims Over \$50,000 **22**
Claimants per 1000 members: **5.0**
Avg. Paid per Claimant: **\$145,240**
Percent of Total Paid: **29.7%**
• Aetna BOB- HCC account for an average of 44.9 % of total Medical Cost

**Aetna One Flex Member Outreach:
Through March 2025**

Total Members Identified: **1,409**
Members Targeted for 1:1 Nurse Support : **388**
Members Targeted for Digital Activity: **1,021**
Member 1:1 outreach completed: **352**
Member 1:1 Outreach in Progress: **66**

**CVS Health. CVS Virtual Care
January 2025 – March 2025**

Completed Visits in March: **3**
Unique Patients in March: **3**
Completed Visits in 2025 : **24**
Unique Patients in 2025: **24**
Total Scheduled Visits in 2025: **33**
Average visit duration: **14** Minutes
BoB: Average First Available: **54** minutes
BoB: Average First Available 6am-6pm: **38** Minutes

**Service Center Performance Goal
Metrics YTD 2024**

Customer Service Performance

1st Call Resolution: **93.88%**
Abandonment Rate: **0.45%**
Avg. Speed of Answer: **15.2 sec**

Claims Performance

Financial Accuracy: **98.68%***
*Q1 2025

90% processed w/in: **7.2 days**
95% processed w/in: **14.9 days**

**Claims Performance (Monthly)
(March 2025)**

90% processed w/in: **8.4 days**
95% processed w/in: **16.8 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												2025 Central HIF					
		MEDICAL CLAIMS PAID 2024	TOTAL	# OF EES	PER EE			MEDICAL CLAIMS PAID 2025		TOTAL		# OF EES	PER EE				
JANUARY		\$11,473.96	\$11,473.96	21	\$546.37	JANUARY		\$38,709.83		\$38,709.83		19	\$2,037.35				
FEBRUARY		\$17,614.16	\$17,614.16	20	\$880.70	FEBRUARY		\$45,329.74		\$45,329.74		19	\$2,385.77				
MARCH		\$17,270.46	\$17,270.46	20	\$863.52	MARCH		\$46,717.38		\$46,717.38		19	\$2,458.80				
APRIL		\$13,834.99	\$13,834.99	19	\$728.15	APRIL		\$23,763.76		\$23,763.76		19	\$1,250.72				
MAY		\$12,505.16	\$12,505.16	19	\$658.16	MAY											
JUNE		\$16,428.54	\$16,428.54	18	\$912.69	JUNE											
JULY		\$14,764.78	\$14,764.78	19	\$777.25	JULY											
AUGUST		\$23,088.14	\$23,088.14	19	\$1,215.16	AUGUST											
SEPTEMBER		\$31,629.86	\$31,629.86	20	\$1,581.49	SEPTEMBER											
OCTOBER		\$56,531.34	\$56,531.34	21	\$2,691.97	OCTOBER											
NOVEMBER		\$31,844.55	\$31,844.55	21	\$1,516.40	NOVEMBER											
DECEMBER		\$29,737.00	\$29,737.00	20	\$1,486.85	DECEMBER											
TOTALS		\$276,722.94				TOTALS		\$154,520.71				19	\$2,033.16				
			2024 Average	20	\$1,154.89												



EXPRESS SCRIPTS®

Central Jersey Health Insurance Fund

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
Membership	3,045	3,020	3,029	3,031	3,021	3,271	3,272	3,188	3,275	3,248	3,269	3,264	3,288	3,275	3,272	3,278
Total Days	129,293	124,083	116,824	370,200	124,354	133,054	123,809	381,217	136,078	132,005	128,332	396,415	140,523	128,634	132,282	401,439
Total Patients	1,228	1,225	1,207	1,882	1,175	1,244	1,208	1,891	1,239	1,243	1,233	1,904	1,367	1,311	1,335	2,036
Total Plan Cost	\$755,968	\$735,690	\$757,826	\$2,249,484	\$728,349	\$887,209	\$894,099	\$2,509,656	\$963,913	\$910,595	\$997,981	\$2,872,489	\$978,588	\$760,873	\$951,472	\$2,690,933
Generic Fill Rate (GFR) - Total	86.5%	86.0%	87.5%	86.6%	86.0%	86.4%	85.4%	85.9%	85.9%	85.3%	81.6%	84.3%	81.9%	85.0%	85.8%	84.2%
Plan Cost PMPM	\$248.27	\$243.61	\$250.19	\$247.36	\$241.10	\$271.23	\$273.26	\$262.41	\$294.32	\$280.36	\$305.29	\$293.35	\$297.62	\$232.33	\$290.79	\$273.61
Total Specialty Plan Cost	\$369,803	\$324,198	\$395,648	\$1,089,649	\$318,327	\$419,220	\$425,545	\$1,163,091	\$490,408	\$443,790	\$497,777	\$1,431,976	\$465,530	\$295,128	\$474,968	\$1,235,626
Specialty % of Total Specialty Plan Cost	48.9%	44.1%	52.2%	48.4%	43.7%	47.3%	47.6%	46.3%	50.9%	48.7%	49.9%	49.9%	47.6%	38.8%	49.9%	45.9%

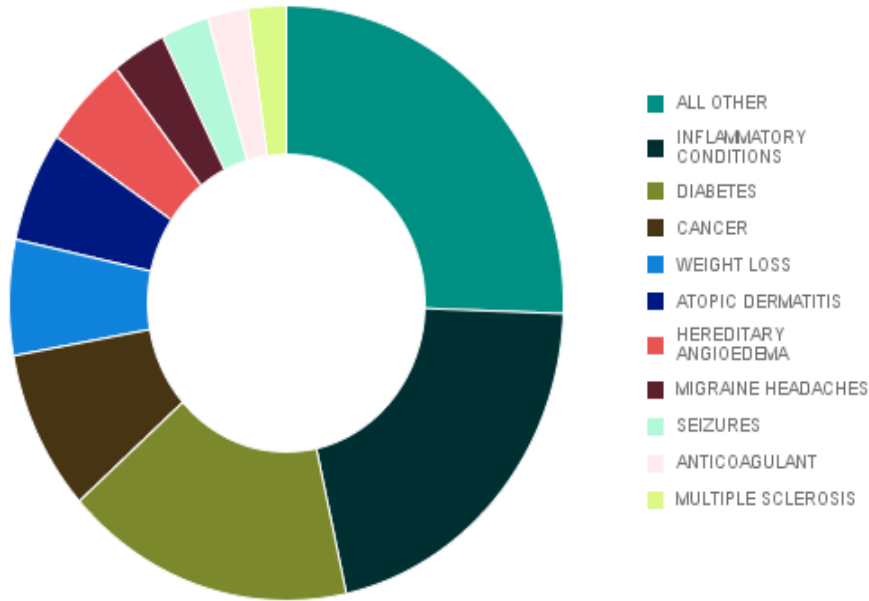
Total Component/Date of Service (Month)	2025 01	2025 02	2025 03	2025 Q1	2025 04	2025 05	2025 06	2025 Q2	2025 07	2025 08	2025 09	2025 Q3	2025 10	2025 11	2025 12	2025 Q4
Membership	3,326	3,321	3,324	3,324												
Total Days	143,145	125,837	141,788	410,770												
Total Patients	1,369	1,316	1,303	2,016												
Total Plan Cost	\$966,071	\$858,036	\$996,509	\$2,820,616												
Generic Fill Rate (GFR) - Total	87.0%	86.5%	85.7%	86.4%												
Plan Cost PMPM	\$290.46	\$258.37	\$299.79	\$282.88												
% Change Plan Cost PMPM	17.0%	6.1%	19.8%	14.4%												
Total Specialty Plan Cost	\$486,534	\$418,595	\$535,098	\$1,440,227												
Specialty % of Total Specialty Plan Cost	50.4%	48.8%	53.7%	51.1%												

Encircle Reporting (Jan 2025 to March 2025)	
Total rejects due to Omada	41
Total rejects due to prior authorization review	56
Members engaged in Omada	53

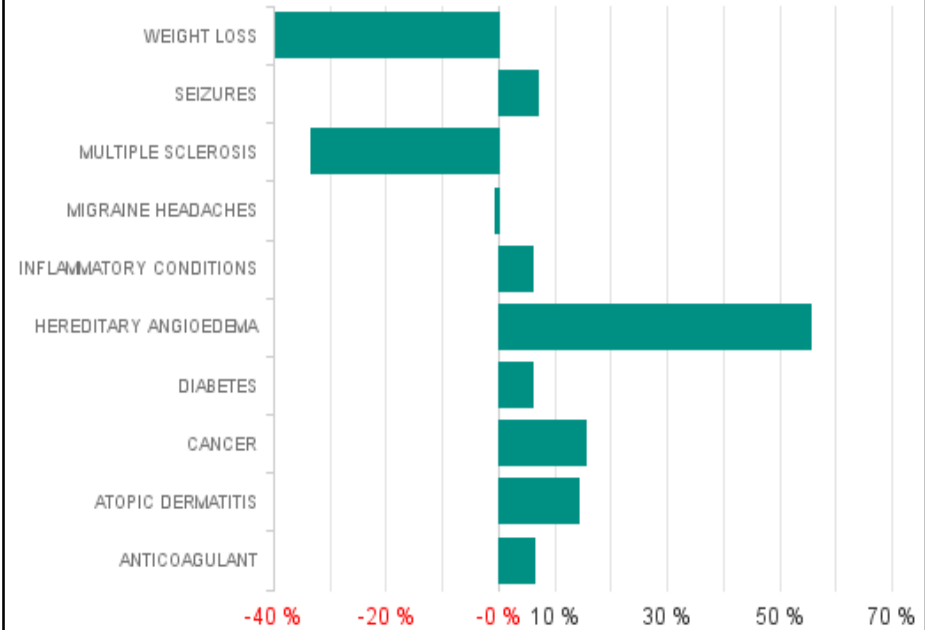
Top Indications

CENTRAL JERSEY HEALTH INSUR. (Current Period 01/2025 - 03/2025 vs. Previous Period 10/2024 - 12/2024) Peer = Government - National Preferred Formulary

Top Indications by Plan Cost



Plan Cost PMPM Trend



			Current Period							Previous Period						Trend
Rank	Peer Rank	Indication	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Plan Cost PMPM	
1	2	INFLAMMATORY CONDITIONS	28.2 %	138	\$577,601	\$57.93	34.1 %	31.1 %	26.9 %	113	\$536,693	\$54.57	44.2 %	30.7 %	6.2 %	
2	1	DIABETES	22.7 %	1,204	\$465,171	\$46.65	28.2 %	24.4 %	21.7 %	1,189	\$432,352	\$43.96	28.4 %	25.0 %	6.1 %	
3	3	CANCER	11.8 %	90	\$241,061	\$24.18	74.4 %	76.2 %	10.3 %	94	\$206,001	\$20.95	84.0 %	75.7 %	15.4 %	
4	4	WEIGHT LOSS	8.4 %	167	\$172,716	\$17.32	3.0 %	4.5 %	14.1 %	259	\$282,328	\$28.71	1.2 %	4.0 %	-39.7 %	
5	5	ATOPIC DERMATITIS	8.1 %	172	\$165,527	\$16.60	69.8 %	80.7 %	7.2 %	176	\$142,803	\$14.52	76.1 %	80.7 %	14.3 %	
6	10	HEREDITARY ANGIOEDEMA	6.8 %	3	\$138,525	\$13.89	0.0 %	7.9 %	4.4 %	2	\$87,953	\$8.94	0.0 %	11.5 %	55.4 %	
7	6	MIGRAINE HEADACHES	4.3 %	108	\$87,212	\$8.75	34.3 %	52.0 %	4.3 %	123	\$86,469	\$8.79	40.7 %	52.4 %	-0.5 %	
8	9	SEIZURES	3.7 %	270	\$76,546	\$7.68	91.1 %	96.9 %	3.5 %	270	\$70,671	\$7.19	90.4 %	96.9 %	6.8 %	
9	7	ANTICOAGULANT	3.2 %	131	\$65,169	\$6.54	10.7 %	18.5 %	3.0 %	119	\$60,470	\$6.15	3.4 %	17.9 %	6.3 %	
10	8	MULTIPLE SCLEROSIS	3.0 %	12	\$61,422	\$6.16	25.0 %	48.2 %	4.6 %	12	\$91,065	\$9.26	25.0 %	49.3 %	-33.5 %	
Total Top 10				2,295	\$2,050,950	\$205.69	38.3 %	40.3 %		2,357	\$1,996,803	\$203.03	38.4 %	40.4 %	1.3 %	

Top Drugs

CENTRAL JERSEY HEALTH INSUR. (Current Period 01/2025 - 03/2025 vs. Previous Period 10/2024 - 12/2024) 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	24	HUMIRA (CF) PEN	INFLAMMATORY CONDITIONS	Y	24	5	\$159,497	\$16.00	11	4	\$86,664	\$8.81	81.5 %
2	4	OZEMPIC	DIABETES	N	159	49	\$146,705	\$14.71	155	52	\$138,805	\$14.11	4.2 %
3	7	STELARA	INFLAMMATORY CONDITIONS	Y	11	4	\$146,287	\$14.67	12	4	\$197,862	\$20.12	-27.1 %
4	361	ORLADEYO	HEREDITARY ANGIOEDEMA	Y	3	1	\$138,525	\$13.89	2	1	\$87,953	\$8.94	55.4 %
5	8	ZEPBOUND	WEIGHT LOSS	N	99	37	\$98,899	\$9.92	121	48	\$119,843	\$12.19	-18.6 %
6	9	DUPIXENT PEN	ATOPIC DERMATITIS	Y	30	10	\$98,268	\$9.86	25	8	\$91,928	\$9.35	5.4 %
7	1	MOUNJARO	DIABETES	N	93	31	\$93,546	\$9.38	62	22	\$61,426	\$6.25	50.2 %
8	206	HUMIRA PEN	INFLAMMATORY CONDITIONS	Y	7	2	\$83,071	\$8.33	7	2	\$73,331	\$7.46	11.7 %
9	16	WEGOVY	WEIGHT LOSS	N	58	25	\$71,764	\$7.20	129	49	\$160,333	\$16.30	-55.9 %
10	44	VERZENIO	CANCER	Y	5	2	\$69,409	\$6.96	2	2	\$21,029	\$2.14	225.6 %
11	17	SKYRIZI PEN	INFLAMMATORY CONDITIONS	Y	12	3	\$67,612	\$6.78	9	3	\$62,232	\$6.33	7.2 %
12	53	KISQALI	CANCER	Y	4	1	\$50,705	\$5.09	4	1	\$48,281	\$4.91	3.6 %
13	29	ELIQUIS	ANTICOAGULANT	N	92	31	\$50,240	\$5.04	88	27	\$46,352	\$4.71	6.9 %
14	68	BIMZELX AUTOINJECTOR	INFLAMMATORY CONDITIONS	Y	4	1	\$43,791	\$4.39	1	1	\$10,468	\$1.06	312.6 %
15	39	DUPIXENT SYRINGE	ATOPIC DERMATITIS	Y	13	4	\$42,937	\$4.31	8	4	\$29,300	\$2.98	44.5 %
16	111	NUBEQA	CANCER	Y	4	1	\$40,325	\$4.04	3	1	\$28,803	\$2.93	38.1 %
17	26	FARXIGA	DIABETES	N	65	21	\$36,176	\$3.63	70	23	\$36,857	\$3.75	-3.2 %
18	107	LENVIMA	CANCER	Y	2	1	\$33,295	\$3.34	1	1	\$23,649	\$2.40	38.9 %
19	20	RINVOQ	INFLAMMATORY CONDITIONS	Y	5	2	\$31,777	\$3.19	6	2	\$50,252	\$5.11	-37.6 %
20	50	UBRELVY	MIGRAINE HEADACHES	N	26	13	\$30,457	\$3.05	19	9	\$23,041	\$2.34	30.4 %
21	13	JARDIANCE	DIABETES	N	50	16	\$28,534	\$2.86	55	18	\$28,778	\$2.93	-2.2 %
22	204	CALQUENCE	CANCER	Y	2	1	\$27,933	\$2.80	NA	NA	NA	NA	NA
23	35	NURTEC ODT	MIGRAINE HEADACHES	N	17	8	\$25,359	\$2.54	23	9	\$33,122	\$3.37	-24.5 %
24	142	ZEPOSIA	MULTIPLE SCLEROSIS	Y	3	1	\$19,712	\$1.98	3	1	\$26,947	\$2.74	-27.8 %
25	54	KESIMPTA PEN	MULTIPLE SCLEROSIS	Y	3	1	\$19,597	\$1.97	3	1	\$26,479	\$2.69	-27.0 %
Total Top 25					791		\$1,654,421	\$165.92	819		\$1,513,737	\$153.91	7.8 %



Claims Summary

Cost Containment

Claims	Dollars	Definition
Submitted Claims	\$4,783,728	Claims submitted by participating and non-participating dentists
(-) Savings		
(-)Network Discount	\$1,516,697	Savings from network participating dentist discounts
(-)Administrative	\$658,561	Contract limits, non-covered, non-billable services, optional services
(-)Dental Consultant	\$13,070	Clinical claim review by dental consultants
(-)Eligibility Verification	\$29,705	Claims for in-eligible members
(-)COB	\$205,718	Coordination of benefits
(-)Other	\$757,881	Deductibles, patient coinsurance
(=)Total Savings	\$3,181,631	
Delta Dental Paid	\$1,602,097	Amount paid by Delta Dental

Network Discount

Network	Submitted Claims	Paid Claims	Network Discount	Network Discount / Submitted Claims
Total Network Discount	\$4,407,274	\$1,512,676	\$1,516,697	34.41%
Out of Network	\$376,454	\$89,421		
Total	\$4,783,728	\$1,602,097	\$1,516,697	

**CENTRAL JERSEY HEALTH INSURANCE FUND
CONSENT AGENDA
MAY 21, 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 20-25: Approving 2024 Annual Audit	Page 39
Resolution 21-25: Closing Fund Year 2023.....	Page 42
Resolution 22-25: Out of Network Revision	Page 43
Resolution 23-25: Adopting 2025 Wellness Grant Programs.....	Page 44
Resolution 24-25: Offering New Membership	Page 45
Resolution 25-25: March Supplement, April, and May 2025 Bills List	Page 46

RESOLUTION NO. 20-25

**CENTRAL JERSEY HEALTH INSURANCE FUND
CERTIFICATION OF ANNUAL AUDIT REPORT FOR
PERIOD ENDING DECEMBER 31, 2024**

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 2024 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

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 21, 2025

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 2024.
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. 21-25

**CENTRAL JERSEY HEALTH INSURANCE FUND
APPROVAL TO CLOSE FUND YEAR 2023**

WHEREAS, the **Central Jersey Health Insurance Fund** held a Public Meeting on **May 21, 2025** 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 2023 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 2023 have been satisfied;

NOW THEREFORE BE IT RESOLVED the of the Central Jersey Health Insurance Fund hereby close Fund Year 2023 into its Closed Year Accounting.

ADOPTED: MAY 21, 2025

BY: _____
CHAIRPERSON

ATTEST: _____
SECRETARY

RESOLUTION NO. 22-25

CENTRAL JERSEY HEALTH INSURANCE FUND

**RESOLUTION TO REVISE MEMBER PLAN DOCUMENTS TO REFLECT CERTAIN OUT OF
NETWORK PROCEDURES AND SURGERY CENTER CODES TO BE PAID AT THE HIGHEST
IN NETWORK RATE**

WHEREAS, the Central Jersey Health Insurance Fund (hereinafter "the Fund") places the public trust above all else and remains steadfast in its commitment to the highest ethical standards in the conduct of its business on behalf of the taxpayers of the Fund members; and

WHEREAS, the Fund contracts with Aetna as a Third Party Administrator to adjudicate claims as outlined in the member plan documents and Summary Benefits;

WHEREAS, the Executive Director of the Fund and Aetna performed a review of certain out of network claims, involving CPT codes 36465, 36475 and 36476, whose paid amounts were excessively higher than the in network alternative being paid by Aetna;

WHEREAS, the Executive Committee of the Fund reviewed the impact of the aforementioned claims and found it prudent to instruct Aetna that effective August 1, 2025 the following CPT codes of 36465, 36475 and 36476 that are submitted by an out of network provider for reimbursement, be reimbursed at an amount not to exceed, the highest contracted in network allowed amount;

WHEREAS, the Finance Committee has evaluated the potential claim increase provided by the Executive Director and Aetna and joins in this recommendation to instruct Aetna, as described above;

NOW, THEREFORE, BE IT RESOLVED that the Fund approves the recommendation set forth herein to instruct Aetna as indicated above, and included in this resolution, and further instructs that this directive be incorporated and included in the claims adjudication system with the Third-Party Administrator and in member plan documents, effective August 1, 2025;

ADOPTED: MAY 21, 2025

BY: _____
CHAIRPERSON

ATTEST: _____
SECRETARY

RESOLUTION NO. 23-25**CENTRAL JERSEY HEALTH INSURANCE FUND
ADOPTING 2025 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, 2025 through December 31, 2025. 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
Lakewood Township			X	\$15,500.00	\$1,500.00	\$17,000.00	Challenge, Wellness Workshops, Fair, Wellbeing initiatives
Bedminster			X			\$7,500.00	Kickball Tournament with healthy lunch, step challenges by Terryberry with prizes
Atlantic Highlands			X	\$9,850.00		\$9,850.00	Wellness Day/ Fair with vendors to provide educational presentations
Oceanport			X	\$8,400.00	\$1,000.00	\$9,400.00	Employee Assistance Program managed by Preferred Behavioral Health Group
Red Bank			X	\$10,500.00		\$10,500.00	Wellness Program focusing on Mental Health Resources, Physical Health Initiatives, Health Education and Team-Building Activities
Toms River MUA			X	\$4,000.00	\$1,000.00	\$5,000.00	Advanta Active Fit Program
Monmouth County Bayshore Outfall Authority			x	\$3,600.00		\$3,600.00	Monthly Incentives for Employees - Walking Challenges, Gym Attendance
Montgomery Township			x	\$10,850.00		\$10,850.00	Biometric Screenings, Personalized Health Coaching, Wellness Events
Totals						\$73,700.00	
Remainder available for Grants						\$76,300.00	

WHEREAS, on May 21, 2025, the Commissioners of Central Jersey Health Insurance Fund approved Wellness Grant Programs totaling **\$14,450** for Monmouth County Bayshore Outfall Authority and Montgomery Township

ADOPTED: MAY 21, 2025

BY: _____
CHAIRPERSON

ATTEST: _____
SECRETARY

RESOLUTION NO. 24-25

**CENTRAL JERSEY HEALTH INSURANCE FUND
RESOLUTION TO OFFER MEMBERSHIP**

WHEREAS, the Central Jersey Health Insurance Fund (hereinafter the Fund) is duly constituted as a joint insurance fund and is subject to certain requirements of the Local Public Contracts Law; and;

WHEREAS, the Fund held a Public Meeting on **May 21, 2025** for the purposes of conducting the official business of the Fund; and

WHEREAS, the Executive Director and Actuary of the Fund has reviewed the risk, underwriting detail, and actuarial projections for the Township of Washington – Morris County and offers of membership; and

WHEREAS, the Operations Committee has reviewed the following new member submission and has approved membership to the entity contingent upon a fully executed Indemnity and Trust agreement to join the Fund

Township of Washington – Morris County – Effective 7/1/2025

BE IT RESOLVED, it has been determined that the admission to membership in the Fund of Township of Washington – Morris County as a standard member which would be in the best interests of the Fund and the inclusion of the entities in the Fund is consistent with the Fund’s By-laws;

BE IT RESOLVED, that the Central Jersey Health Insurance Fund hereby offers membership to the above mentioned entity’s for medical and prescription coverage, contingent upon receipt acceptance of the conditions stated above.

ADOPTED: MAY 21, 2025

BY: _____
CHAIRPERSON

ATTEST: _____
SECRETARY

RESOLUTION NO. 25-25

**CENTRAL JERSEY HEALTH INSURANCE FUND
APPROVAL OF THE MARCH SUPPLEMENT, APRIL, AND MAY 2025 BILLS LISTS**

WHEREAS, the Central Jersey Health Insurance Fund held a Public Meeting on May 21, 2025 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 March Supplement, April, and May 2025 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 February 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 Supplement, April, and May 2025 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 21, 2025

BY: _____
CHAIRPERSON

ATTEST: _____
SECRETARY

APPENDIX I

CENTRAL JERSEY HEALTH INSURANCE FUND
OPEN MINUTES
March 19, 2025
ZOOM MEETING
1:30 PM

Meeting called to order by Secretary Brian Brach. The Open Public Meeting notice read into record.

PLEDGE OF ALLEGIANCE

MEETING OF EXECUTIVE COMMITTEE CALLED TO ORDER

ROLL CALL OF 2025 EXECUTIVE COMMITTEE

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

APPOINTED OFFICIALS PRESENT:

Executive Director/ Administrator	PERMA Risk Management Services	Brandon Lodics Emily Koval Caitlin Perkins Jordyn Robinson	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	Tyler Jackson	Present
Dental Claims Service	Delta Dental	Crista O'Donnell	Absent
Rx Administrator	Express Scripts	Hiteksha Patel	Absent

OTHERS PRESENT:

Barbara Vilanova	Raquel Dunn	Scott Davenport
Lindsay Klein	Carmella	James Tricarico
Cindy Toye	Tyler Jackson	Tom Fletcher
Sana Siddiqui	Mary Hlywiak	Lindsey Becker
John Lajewski	Ryan Michelson	Alison Kelly
Donna Phelps	Lisa Hardman	Kathleen Flanagan
Charles Casagrande	Jacque Maddren	Ian Dalton
Catherine LaPorta	Lisa Narcise	Kim Humphrey

MOTION TO APPROVE OPEN MINUTES OF JANUARY 15, 2025, OPEN:

MOTION:	Chair Nolan
SECOND:	Commissioner Valentino
VOTE:	All in Favor

EXECUTIVE DIRECTOR REPORT

CORRESPONDENCE – Ms. Koval announced that it was recently informed of Commissioner Lapp’s upcoming retirement, expected in June or July. Although Commissioner Lapp is not present today, she has served as a long-standing, dedicated, and engaged member of the Commission. Ms. Koval expressed her gratitude for Commissioner Lapp’s valuable contributions to the Fund, thanked her for her service, and wished her a happy retirement.

Commissioner Brach thanked Commissioner Lapp and wished her a happy and healthy retirement.

PRO FORMA REPORTS – Ms. Koval reviewed the Financial Fast track through December 2024, which reflect a positive surplus but an overall \$4.7M loss year to date with about a \$7M of reserves. She noted there was a Finance Committee meeting where the year-end financials were reviewed, discussions of recommendations that could possibly reduce the costs. The PowerPoint presentation was sent as an attachment with the agenda and if there are any questions, please reach out to the Executive Director.

Mr. Lajewski, the HIF Consulting Sales Leader, commented that after reviewing historical data for the driving costs to provide specific areas to focus on. He stated there are some solutions being vetted to address these conditions as well as compiling an underwriting manual that will help individual fund members and broker partners.

Commissioner Brach commented that the financial situation for 2024 was not the best last year and resulted in a bigger than normal budget increase but feels confident that the issues were identified, and the Fund is being managed appropriately. He noted that moving forward is important to keep an eye on things and adjust as necessary.

QPA RFP – Provides PERMA to go out for quotes for QPA at the local Fund level for 2025.

MOTION TO ALLOW PERMA TO GO OUT FOR QPA SERVICES FOR 2025:

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

2025 PROFESSIONAL/CONSULTANTS RFP UPDATES – Ms. Koval reviewed the RFP results for the Fund Attorney and Fund Treasurer where the incumbents were the only responder. Additionally, the Program Manager was previously approved but due to an oversight on an advertisement, it had to be re-released. There were changes to the response and the fees for all three services are appropriate with the adopted budget.

2025 WELLNESS GRANT APPLICATIONS – Ms. Koval reviewed the four wellness grant responses that were received for Atlantic Highlands, Oceanport, Red Bank, and Toms River MUA. She noted the four groups' applications were approved by the wellness committee and Resolution 16-25 approves the grants. Ms. Koval reminded that wellness applications are due at the end of June.

SCHOOL BOARD COVID-19 GRANT AWARD – Ms. Koval noted on behalf of our School Board members, PERMA has been working with the MRHIF Lobbyist to receive reimbursements for medical claims attributed to Executive Order No. 253, which required routine COVID-19 testing for School Board employees who were unvaccinated. CJHIF's share of this reimbursement will be \$969.

Hi FUND MARKETING UPDATE – Ms. Koval discussed the additional information that is included on all the Fund websites to help increase understanding of what Hi Fund is and its purpose.

PHARMACY BENEFIT MANAGER (PBM_ RFP) – Ms. Koval reviewed the council advised to get approval for this RFP to be released at the local level. If this RFP can be released at the Co-Op level, we will provide notice at the next meeting, but the RFP needs to be released as soon as possible for a January 1, 2026, effective date.

COOPERATIVE PRICING SYSTEM TPA RFP – LEGAL BILLING – Ms. Koval noted that there will be invoices from the SNJHIF Attorney, who is the lead agent of the Cooperative Pricing System, for his contributions and efforts in the Third-Party Administrator RFPs that require Comptroller Approval.

VOUCHERS – Ms. Koval reminded that starting with April vouchers, PERMA will be sending both vouchers and backup exclusively through DocuSign instead of email.

GASB 75 – Ms. Koval provided a reminder that any GASB 75 reports requests should be sent to Jordyn Robinson.

2025 MEL, MR HIF & NJCE JIF Educational Seminar – Ms. Koval reviewed the information for the 15th annual seminar will be conducted virtually on 2 half-day sessions: Friday April 25th and Friday May 2nd from 9AM to 12PM.

I&T AGREEMENTS – Ms. Koval noted that an outreach was made on March 5th to the brokers of those groups who have outstanding I&T agreements. An updated list will be provided at the next meeting.

Commissioner Brach commented that there was a notice from the State Health Benefit Program midyear review, stating that the increases will be aligned with what we have been seeing.

PROGRAM MANAGER’S REPORT – Ms. Bailey reviewed the following items:

OPERATIONAL UPDATES:

Eligibility/Enrollment:

Please direct any eligibility, enrollment, or system related questions to our dedicated Client Service Team member:

- Marlene Robinson, mrobinson@permainc.com, 856-552-4818
- Sheena Bailey, sbailey@permainc.com, 856-446-9283

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:

Express Scripts:

Encircle Program (GLP-1 Weight Loss)

Effective September 1, 2024:

- Members with new prescriptions, including renewal prescriptions for expired prior authorizations (PA), will need to meet the following criteria to be approved for a GLP-1 weight loss medication:
 - BMI \geq 32 OR
 - BMI between 27 \leq 32 WITH 2 or more documented comorbidities
- Members with an active approved PA prior to 9/1/2024 will be grandfathered
 - Upon renewal of their PA, members will need to meet the above BMI requirements to be considered for approval

- PA renewals will need to include documentation to support the above BMI requirements for all members, regardless of members have been approved in the past.

Effective January 1, 2025:

Members who have an approved PA (active and new) will need to meet the following guidelines:

- 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 requirements outlined above, 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.

2025 LEGISLATIVE REVIEW

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 attachment sent with the agenda.**

Appeals:

Carrier Appeals

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
1/13/25	Medical/ Aetna	CJHIF 2025 01 01	Surgical Services	Upheld	2/7/25
1/15/25	Medical/ Aetna	CJHIF 2025 01 02	Anesthesia	Upheld	02/10/25
1/29/25	Medical/ Aetna	CJHIF 2024 01 03	Skilled Nursing	Under Review	

IRO Submissions:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
1/13/25	Medical/ Aetna	CJHIF 2025 01 01	Surgical Services	Upheld	2/7/25
1/29/25	Medical/ Aetna	CJHIF 2024 01 03	Skilled Nursing	Under Review	

TREASURER – Fund Treasurer reviewed the February and March 2025 bills list included in the agenda. Fund Treasurer continued to review the summary of the cash transactions.

ATTORNEY - Fund Attorney thanked the Fund for his reappointment. He noted the report in the agenda details the settlement with two out of network claims, which is included in the consent agenda for approval.

AETNA - In the absence of Mr. Silverstein, Commissioner Brach noted the Aetna report is in the agenda for review.

AMERIHEALTH - Ms. Strain reviewed the claims for the month of February 2025, noting the average for the February 2025 claims were \$2,385.77 per employee. She stated there were no high cost claimants for the month of February.

EXPRESS SCRIPTS - Mr. Yuk reviewed the monthly utilization report for January 2025, noting the monthly plan cost per member increased 17% from January 2024. Mr. Yuk reviewed the top 10 indications for 2025, commenting there are no significant changes and weight loss continues to be a top trend. He noted the top drug, Ozempic, plan cost has decreased, which is most likely caused by the Encircle program that went in effect on January 1, 2025.

DELTA DENTAL - Ms. O'Donnell reviewed the report in the agenda, showing the network utilization for the calendar year of 2024. She highlighted that there is 94.4% in network utilization. She also highlighted that there was a result of 20.2% for preventative service claims, which helps offset higher cost claims down the line.

MOTION TO APPROVE CONSENT AGENDA, INCLUDING RESOLUTION 15-25 TO 19-25:

MOTION:	Chair Nolan
SECOND:	Commissioner Gant
VOTE:	All in Favor

OLD BUSINESS - None.

NEW BUSINESS - Commissioner Brach thanked Ms. Tammy Brown and Mr. Jason Edelman from Conner Strong & Buckelew that presented at the Association of Environmental Authorities Utility Management Conference. He noted the presentation provided education on health insurance for public entities and it was extremely well received.

Executive Director, Mr. Lodics, thanked the Contracts Committee and Fund Attorney for their involvement in the RFP's, as this was a new process put in place based on the recommendation of the QPA.

PUBLIC COMMENT - Mr. James Tricarico from Bedminster inquired about the premium collection process from members and raised the possibility of requiring all members to submit payments electronically rather than by check. He also asked if there is a current count of participating towns, as well as the number of covered members and individuals. The Fund Treasurer noted that ACH payment instructions are included on the billing statements, and Ms. Koval added that the proposal to mandate electronic payments could be brought before the Finance Committee. In response to Commissioner Gant, Mr. Tricarico stated the rationale would be to increase the timeliness of receiving Funds and promote the use of technology. Commissioner Brach requested a report outlining delinquent payments and the percentage of who pay by check versus electronic to be shared with the Finance Committee for further review. Chair Nolan expressed concern about cyber security issues with transferred payments and believes the paper trail is a safer option.

Program Manager Ms. Bailey commented there was a recent Treasurer town hall meeting covering related topics, including the importance of groups submitting payments timely. She mentioned the possibility of implementing changes to include a billing cutoff date, with any adjustments applied in the next month to avoid delay running bills. Commissioner Gant echoed Chair Nolan's concerns, emphasizing the importance of getting the opinion from the JIFs and MEL. In response to Commissioner Brach inquiry, Ms. Koval confirmed any changes to the billing process could be done by resolution and an amendment to the Cash Management Plan.

MOTION TO ADJOURN MEETING:

MOTION:	Chair Nolan
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SECOND:
VOTE:

Commissioner Brach
All in Favor

MEETING ADJOURNED: 2:11pm

Next Meeting: July 16, 2025, at 1:30 pm, Zoom Meeting

Minutes Prepared by: Caitlin Perkins, Assisting Secretary

APPENDIX II

CJHIF Finance Committee
May 15, 2025, at 10:30AM via Teams

Tom Nolan, CJHIF Executive Committee, Chair
Brian Brach, CJHIF Executive Committee, Secretary
Brandon Lodics, PERMA
Emily Koval, PERMA
Caitlin Perkins, PERMA
Candy Leonard, PERMA
Jack Hammell, Mercadien
Digest Patel, Mercadien
Rachit Bansal, Mercadien

Ms. Koval opened the meeting by providing a quick overview of the items needed to be discussed, starting with the Audit review from Mercadien. Mr. Patel reviewed the audit presentation, highlighting noted Unmodified or “clean” opinion, which is the highest opinion on the financial audit. Mr. Hammell then reviewed the financial highlights, noting the recommendation of I&T agreements for member renewals but no issues with required communications. Ms. Koval noted that we are following up with the I&T agreements that were commented on in the presentation. Commissioner Nolan & Commissioner Brach agree that they feel comfortable presenting the audit and filing with the State. The Mercadien attendees left the meeting at this point for Ms. Koval to review three additional items with the Finance Committee.

The first item is the Fund Treasurer has announced he is stepping down but has agreed to continue to work until a replacement is found but will include a motion at the next meeting to go out for quotes. Commissioner Brach noted that he may have some people interested and will reach out. Ms. Koval also noted that in 2026, the option of a Deputy Treasurer will be discussed.

The second item is the increasing trend of out-of-network vendors, specifically focusing on varicose vein procedures. She explained that providers are approaching public entities to offer on-site informational meetings to encourage members to go to the office for additional consultations and procedures. She noted that a provider did get into one entity so it is expected that they will be approaching other entities in the Fund. To be proactive, it is recommended to cap the CPT codes for these procedures at the in-network fee schedule, ensuring payments do not exceed the in-network rate, regardless of the provider. In response to Commissioner Brach, Ms. Koval noted that there is no requirement to notify the providers that the CPT codes are capped. Chair Nolan and Commissioner Brach agree that this resolution should be included in the next agenda for action.

The third item is the recommendation to cap the Medicare Out-Of-Network fee to 150% benefit, which will help control some of the out of network benefits. This only applies to a handful of new members that came from the State but did warn the committee that there may be some noise from the member unions. Ms. Koval noted that this is only the beginning of this discussion and there is the need for the Fund Attorney and Operations Committee to review before taking Executive Committee action. Commissioner Nolan agrees that the primary purpose is to keep the Fund solvent so allowing these extra benefits will only deplete the resources and hurt the membership. Commissioner Brach agrees and in response to his question, Ms. Koval noted that if this was approved, it would require all new prospects to have this schedule as well.

APPENDIX III



YOU ARE INVITED

Health Insurance Funds Webinar

Dealing with GLP-1 Medications and Out-of-Network Challenges

Staggering costs for GLP-1 medications for weight loss and a steep increase in out-of-network utilization statewide have rocked public entity benefit budgets. These challenges are contributing to rising healthcare costs overall and if left unchecked this will worsen over time.

There are options and solutions that can be acted upon to impact these issues and rein in costs more effectively.

Please join us for this exclusive **"Invitation Only"** webinar for Fund executives directed by PERMA.

Thursday, June 5th

2 p.m. - 3 p.m.

We will cover recommended strategies to address these complex issues and discuss:

- + Challenges and cost issues with GLP-1 medications for weight loss issues
- + Policy recommendations related to managing GLP-1s
- + Challenges with out-of-network fee schedules
- + Policy recommendations for OON challenges
- + Recommendations for dealing with collective bargaining issues
- + Closing comments

Speakers



Joseph DiBella
Executive Partner, National Benefits Leader
Conner Strong & Buckelew



Tammy Brown
Executive Partner, HIF Business Leader
Conner Strong & Buckelew

[Click here to register now](#)



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