



AGENDA AND REPORTS
SEPTEMBER 17, 2025
1:30 PM

Zoom Meeting
<https://permainc.zoom.us/j/99372975806>

Meeting ID: 993 7297 5806

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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: SEPTEMBER 17, 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
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 – West Long Branch Township

APPROVAL OF MINUTES: *July 16, 2025, Open*

Appendix I

CORRESPONDENCE – None

REPORTS:

EXECUTIVE DIRECTOR (PERMA)

Monthly Report.....Page 5
Resolution 31-25: Closed Session..... Page 13

PROGRAM MANAGER– (Conner Strong & Buckelew)

Monthly Report.....Page 14

TREASURER – (Stephen Mayer)

August and September 2025 Voucher ListPage 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 25

NETWORK & THIRD-PARTY ADMINISTRATOR – (AmeriHealth)

Monthly Report.....Page 29

PRESCRIPTION ADMINISTRATOR – (Express Scripts)

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DENTAL ADMINISTRATOR – (Delta Dental)

Monthly Report..... Page 36

CONSENT AGENDA.....Page 38

Resolution 32-25: 2026 Budget Introduction..... Page 39
Revised Resolution 7-25: Designation of Authorized Signatories Page 40
Resolution 33-25: New Member Approval Page 41
Resolution 34-25: August and September 2025 Bills List Page 42

OLD BUSINESS

NEW BUSINESS

PUBLIC COMMENT - *Motion to Open*
Motion to Close

MEETING ADJOURNED

Central Jersey Health Insurance Fund

Executive Director's Report

September 17, 2025

FINANCE AND CONTRACTS

PRO FORMA REPORTS

- **Fast Track and Financial Reports** as of June 30, 2025 (page 7)

2026 CJHIF BUDGET - INTRODUCTION

The 2026 proposed budget is located on page 11 of this report. A 2025 budget presentation is included as an attachment to the agenda which will be reviewed at the meeting.

The Finance Committee also reviewed the presentation and are recommending introduction, as presented. If deemed appropriate, the Committee can introduce the budget and adopt on October 15, 2025.

Assessments are not included at this time. Due to the size of the increase, it is important for PERMA and the Finance Committee to take additional time to consider all factors and allow members to consider plan design changes that may impact individual assessments. Ideally, draft rates will be released prior to adoption.

Resolution: 32-25 is in the Consent Agenda or can be moved separately.

Motion: *Motion to introduce the 2026 Central Jersey Health Insurance Fund Budget in the amount of \$84,053,001 and to advertise a public hearing of the budget adoption on October 15, 2025, via zoom.*

SUPPLEMENTAL ASSESSMENT

In light of the deficit in prior Fund Years, the Finance Committee was made aware that a supplemental assessment may need to be considered. The professionals are continuously monitoring cash and surplus position and advise the Committee if raising additional cash is a necessity.

FUND TREASURER

At the last meeting, Mr. Matt Palmer was approved as Fund Treasurer starting on August 1, 2025. PERMA's accounting staff, Mr. Palmer and Mr. Mayer have successfully collaborated to ensure a smooth transition of treasurer duties. August and September bills lists include fees for both treasurers.

Included in the consent agenda, Revised Resolution 7-25 updates the Fund Treasurer to reflect Matt Palmer as a Fund signatory.

NEW MEMBER

Delaware River Basin Commission has applied to the Fund. Although this group is not a municipality, it is a local public unit that currently covers its employees through the State Health Benefits Fund. Its office is located in the CJHIF territory. Resolution 33-25 is included in consent.

New Member Overview	
Fund	Central Jersey Health Insurance Fund
Entity	Delaware River Basin Commission
County	Mercer County
Effective Date	11/1/2025
Lines of Coverage	Medical and Prescription
Eligible Employees	60
Retiree Coverage	None
Current Arrangement	State Health Benefits
Actuary Certification	Yes: Standard Underwriting Methodology
Broker	Hardenburg
Broker Fee	3%
Run Out Claims	State Health Benefits/Horizon
Member approval?	All required resolutions passed
Special Requests	None

NO SURPRISES ACT LEGISLATIVE LETTERS

With the collaboration of PERMA and the Fund Chairs across the State, letters have been sent to the NJ congressional representatives. Enclosed is a template of the letter that our Chair signed. For CJHIF, the letters were sent to Representatives Pallone, Smith and Conoway.

BROKER PAYMENTS

A few months ago, PERMA advised that it is more appropriate for monthly commissions to be paid direct to our broker partner's firms rather than being collected by the Program Manager and dispersed. This switch will occur in January 2026. Communications outlining the new process will be sent to all brokers prior to that.

EXECUTIVE SESSION

Resolution 31-25 is included on page 13 to go into closed session to discuss procurements and contracts.

CENTRAL JERSEY HEALTH INSURANCE FUND
FINANCIAL FAST TRACK REPORT

		AS OF	June 30, 2025		
		THIS MONTH	YTD CHANGE	PRIOR YEAR END	FUND BALANCE
1.	UNDERWRITING INCOME	5,439,128	32,428,551	970,527,549	1,002,956,100
2.	CLAIM EXPENSES				
	Paid Claims	5,136,921	32,838,242	801,403,345	834,241,587
	IBNR	13,994	498,256	3,986,278	4,484,535
	Less Specific Excess	(147,539)	(1,255,727)	(21,764,468)	(23,020,195)
	Less Aggregate Excess	-	-	(1,000,000)	(1,000,000)
	TOTAL CLAIMS	5,003,376	32,080,771	782,625,156	814,705,927
3.	EXPENSES				
	MA & HMO Premiums	455,918	2,711,271	32,433,949	35,145,220
	Excess Premiums	209,925	1,257,945	43,433,470	44,691,414
	Administrative	326,117	1,922,366	56,732,554	58,654,921
	TOTAL EXPENSES	991,961	5,891,582	132,599,973	138,491,554
4.	UNDERWRITING PROFIT/(LOSS) (1-2-3)	(556,209)	(5,543,802)	55,302,421	49,758,619
5.	INVESTMENT INCOME	4,608	47,362	4,323,181	4,370,543
6.	DIVIDEND INCOME	0	0	8,232,890	8,232,890
7.	STATUTORY PROFIT/(LOSS) (4+5+6)	(551,601)	(5,496,440)	67,858,492	62,362,052
8.	DIVIDEND	0	0	61,010,348	61,010,348
9.	Transferred Surplus	0	0		0
STATUTORY SURPLUS (7-8+9)		(551,601)	(5,496,440)	6,848,144	1,351,704
SURPLUS (DEFICITS) BY FUND YEAR					
Closed	Surplus	8,133	(28,486)	10,117,176	10,088,690
	Cash	8,177	(27,066)	9,956,419	9,929,353
2023	Surplus	(26,360)	(463,045)	(2,160,678)	(2,623,723)
	Cash	513,367	141,287	(2,761,601)	(2,620,314)
2024	Surplus	(189,873)	(752,697)	(7,051,165)	(7,803,862)
	Cash	1,060,469	(1,334,958)	(6,589,940)	(7,924,898)
LAKEWOOD	Surplus	35,974	(424,014)	5,942,811	5,518,798
	Cash	3,372,425	(2,848,018)	6,220,443	3,372,425
2025	Surplus	(379,475)	(3,828,198)		(3,828,198)
	Cash	(282,691)	(23,924)		(23,924)
TOTAL SURPLUS (DEFICITS)		(551,601)	(5,496,440)	6,848,144	1,351,704
TOTAL CASH		4,671,748	(4,092,678)	6,825,321	2,732,643
CLAIM ANALYSIS BY FUND YEAR					
TOTAL CLOSED YEAR CLAIMS		(5,640)	54,043	601,887,313	601,941,356
FUND YEAR 2023					
	Paid Claims	26,696	513,267	40,578,585	41,091,852
	IBNR	0	0	0	0
	Less Specific Excess	0	(46,790)	(867,937)	(914,727)
	Less Aggregate Excess	0	0	0	0
TOTAL FY 2023 CLAIMS		26,696	466,477	39,710,648	40,177,124
FUND YEAR 2024					
	Paid Claims	308,701	4,485,051	42,206,881	46,691,932
	IBNR	(47,948)	(2,582,316)	2,739,858	157,542
	Less Specific Excess	(71,668)	(1,110,363)	(124,196)	(1,234,559)
	Less Aggregate Excess	0	0	0	0
TOTAL FY 2024 CLAIMS		189,085	792,372	44,822,543	45,614,915
LAKEWOOD					
	Paid Claims	1,435,914	8,776,399	0	8,776,399
	IBNR	6,570	179,353	99,306,787	99,486,140
	Less Specific Excess	(75,870)	(98,574)	1,246,420	1,147,847
	Less Aggregate Excess	0	0	(4,348,556)	(4,348,556)
TOTAL LAKEWOOD CLAIMS		1,366,614	8,857,178	96,204,651	105,061,829
FUND YEAR 2025					
	Paid Claims	3,371,249	19,009,482		19,009,482
	IBNR	55,372	2,901,219		2,901,219
	Less Specific Excess	0	0		0
	Less Aggregate Excess	0	0		0
TOTAL FY 2025 CLAIMS		3,426,621	21,910,702		21,910,702
COMBINED TOTAL CLAIMS		5,003,376	32,080,771	782,625,154	814,705,925

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

CENTRAL JERSEY HEALTH INSURANCE FUND								
RATIOS								
		FY2025						
INDICES	2024	JAN	FEB	MAR	APR	MAY	JUN	JUL
Cash Position	6,825,321	\$ 5,287,641	\$ 4,267,271	\$ 3,834,896	\$ 2,787,804	\$ 2,841,349	\$ 2,732,643	
IBNR	3,986,278	\$ 4,463,280	\$ 4,327,691	\$ 4,425,064	\$ 4,453,903	\$ 4,470,541	\$ 4,484,535	
Assets	11,157,317	\$ 11,048,728	\$ 10,456,404	\$ 9,196,245	\$ 7,930,055	\$ 6,777,059	\$ 6,269,758	
Liabilities	4,309,178	\$ 4,805,634	\$ 4,671,606	\$ 4,788,851	\$ 4,837,546	\$ 4,873,758	\$ 4,886,560	
Surplus	6,848,139	\$ 6,243,094	\$ 5,784,798	\$ 4,407,393	\$ 3,092,508	\$ 1,903,300	\$ 1,383,198	
Claims Paid -- Month	4,330,758	\$ 4,533,919	\$ 4,935,470	\$ 5,759,490	\$ 5,963,721	\$ 6,515,010	\$ 5,138,154	
Claims Budget -- Month	3,854,188	\$ 4,422,139	\$ 4,436,985	\$ 4,427,478	\$ 4,427,047	\$ 4,425,320	\$ 4,440,213	
Claims Paid -- YTD	61,708,671	\$ 4,533,919	\$ 9,469,390	\$ 15,228,880	\$ 21,192,601	\$ 27,707,611	\$ 32,845,765	
Claims Budget -- YTD	54,171,047	\$ 4,422,139	\$ 8,859,124	\$ 13,286,602	\$ 17,713,649	\$ 22,138,969	\$ 26,569,134	
RATIOS								
Cash Position to Claims Paid	1.58	1.17	0.86	0.67	0.47	0.44	0.53	
Claims Paid to Claims Budget -- Month	1.12	1.03	1.11	1.3	1.35	1.47	1.16	
Claims Paid to Claims Budget -- YTD	1.14	1.03	1.07	1.2	1.2	1.3	1.2	
Cash Position to IBNR	1.71	1.18	0.99	0.87	0.63	0.64	0.61	
Assets to Liabilities	2.59	2.30	2.24	1.92	1.64	1.39	1.28	
Surplus as Months of Claims	1.78	1.41	1.30	1.00	0.7	0.43	0.31	
IBNR to Claims Budget -- Month	1.03	1.01	0.98	1.00	1.01	1.01	1.01	

Central Jersey Health Insurance Fund						
2025 Budget Report						
AS OF JUNE 30, 2025						
				Cumulative	\$ Variance	% Variance
Expected Losses	Cumulative	Annual	Latest Filed	Expensed		
Medical Claims AmeriHealth 12/31 Renewal	0	0	20,595			
Medical Claims AmeriHealth 6/30 Renewal	163,218	349,247	381,389			
Medical Claims Aetna 12/31 Renewal	13,636,233	28,341,963	25,708,509			
Medical Claims Aetna 6/30 Renewal	225,667	471,429	504,115			
Subtotal Medical Claims	14,025,118	29,162,639	26,614,608	16,236,776	(2,189,105)	-16%
Prescription Claims 12/31 Renewal	4,285,184	8,785,726	7,981,434			
Prescription Claims 6/30 Renewal	84,768	174,570	184,591			
Less Rx Rebates	(1,310,986)	(2,688,089)	(2,449,808)			
Subtotal Prescription Claims	3,058,966	6,272,207	5,716,217	4,821,418	(1,762,452)	-58%
Dental Claims 12/31 Renewal	949,672	1,900,959	1,868,108			
Dental Claims 6/30 Renewal	0	0	0			
Subtotal Dental Claims	949,672	1,900,959	1,868,108	852,508	97,164	10%
Vision Claims	22,553	45,394	37,407	Included in Medical Claims		
Lakewood SIR Claims						
Medical	6,285,259	12,543,210	13,740,924	7,058,181	(772,922)	-12%
Prescription	2,227,566	4,447,023	4,623,988	1,798,996	428,570	19%
Subtotal Claims	26,569,134	54,371,432	52,601,252	30,767,880	(4,198,746)	-16%
Medicare Advantage / EGWP	2,397,554	4,841,324	4,453,224	2,708,867	42,706	2%
Medicare Advantage - Rx	354,018	722,662	805,219	Included in Medicare Advantage / EGWP		
DMO Premiums	2,417	4,887	3,867	2,404	14	1%
Reinsurance						
Specific	535,048	1,104,748	1,023,757			
Lakewood - ICH	723,383	1,447,000	1,498,099			
Subtotal Reinsurance	1,258,431	2,551,747	2,521,856	1,257,945	486	0%
Loss Fund Contingency	117,410	234,821	132,134	0	117,410	100%
Total Loss Fund	30,698,965	62,726,874	60,517,552	34,737,095	(4,038,130)	-13%
Expenses						
Legal	18,580	37,161	37,161	18,433	147	1%
Treasurer	6,630	13,260	13,260	6,630	-	0%
Administrator	255,202	516,470	497,886	254,508	693	0%
Program Manager	956,312	1,962,715	1,810,853	965,962	(2,000)	0%
Actuary	8,619	17,238	17,238	8,620	(1)	0%
Auditor	10,710	21,420	21,420	10,710	-	0%
TPA - Aetna	432,424	885,512	888,077	437,348	(405)	0%
TPA - AmeriHealth	4,519	8,721	9,504	Included above in TPA - Aetna		
Plan Documents	7,650	15,300	15,300	Included in Program Manager		
Dental TPA	44,616	89,355	88,040	44,700	(84)	0%
Wellness	75,000	150,000	150,000	75,000	-	0%
Affordable Care Act	5,454	11,163	10,674	5,459	(5)	0%
A4 Retiree Surcharge	7,525	15,890	14,354	7,523	2	0%
Claims Audit	20,000	40,000	40,000	19,998	2	0%
Misc/Cont	10,593	21,185	21,185	3,829	6,763	64%
Total Expenses	1,863,835	3,805,388	3,634,951	1,858,722	5,113	0%
		9				
Total Budget	32,562,799	66,532,262	64,152,504	36,595,816	(4,033,017)	-12%

Central Jersey Health Insurance Fund

CONSOLIDATED BALANCE SHEET

AS OF JUNE 30, 2025

BY FUND YEAR

	CJ HIF 2025	CJ HIF 2024	CJ HIF 2023	CLOSED YEAR	LAKEWOOD	FUND BALANCE
ASSETS						
Cash & Cash Equivalents	(23,924)	(7,924,898)	(2,620,314)	9,929,353	3,372,425	2,732,643
Assesments Receivable (Prepaid)	(1,708,520)	192,171	(3,409)	332,619	2,824,382	1,637,242
Interest Receivable	-	-	-	-	-	-
Specific Excess Receivable	-	71,668	0	-	365,784	437,452
Aggregate Excess Receivable	-	-	-	-	-	-
Dividend Receivable	-	-	-	-	-	-
Prepaid Admin Fees	-	-	-	-	-	-
Other Assets	924,156	124,785	-	-	381,980	1,430,921
Total Assets	(808,289)	(7,536,273)	(2,623,723)	10,261,973	6,944,571	6,238,259
LIABILITIES						
Accounts Payable	-	-	-	-	-	-
IBNR Reserve	2,901,219	157,542	-	-	1,425,773	4,484,535
A4 Retiree Surcharge	7,523	10,333	-	-	-	17,856
Dividends Payable	-	-	-	-	-	-
Retained Dividends	-	-	-	173,288	-	173,288
Accrued/Other Liabilities	111,167	99,714	-	-	-	210,881
Total Liabilities	3,019,909	267,589	-	173,288	1,425,773	4,886,560
EQUITY						
Surplus / (Deficit)	(3,828,198)	(7,803,862)	(2,623,723)	10,088,685	5,518,798	1,351,699
Total Equity	(3,828,198)	(7,803,862)	(2,623,723)	10,088,685	5,518,798	1,351,699
Total Liabilities & Equity	(808,289)	(7,536,273)	(2,623,723)	10,261,973	6,944,571	6,238,259
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 Municipal Employee Benefits Fund					
2026 Proposed Budget			Print date	14-Sep-25	
Census:					
	Census All Members			Census Excl Lakewood/Lakewood MUA	
	Monthly		Annual	Monthly	Annual
Medical AmeriHealth	18		216	18.00	216
Medical Aetna	1,904		22,848	1,388.00	16,656
Rx	1,942		23,304	1,425.00	17,100
Dental	2,118		25,416	1,434.00	17,208
Vision Aetna	230		2,760	230.00	2,760
Medicare Advantage - Medical	987		11,844	851.00	10,212
Medicare Advantage - Rx Only (Brick)	307		3,684	307.00	3,684
RxNo Medical (Incl in Rx above)	490		5,880	489.00	5,868
Dental No Med No Rx (Incl in Dental above)	1063		12,756	886.00	10,632
DMO Only	1		12	1.00	12
Medicare Advantage Only	740		8,880	714.00	8,568

	LINE ITEMS	2025 Annualized Budget	IN DEVELOPMENT BUDGET	2026 Proposed Budget	\$ Change	% Change
1	Medical Claims AmeriHealth 12/31 Renewal	\$ -	\$ -	\$ -	\$ -	0.00%
2	Medical Claims AmeriHealth 6/30 Renewal	\$ 381,389	\$ 489,468	\$ 489,457	\$ 108,068.00	28.34%
3	Medical Claims Aetna 12/31 Renewal	\$ 29,424,876	\$ 36,335,993	\$ 36,389,404	\$ 6,964,528.00	23.67%
4	Medical Claims Aetna 6/30 Renewal	\$ 475,273	\$ 591,333	\$ 591,333	\$ 116,060.00	24.42%
5	Subtotal Medical Claims	\$ 30,281,538	\$ 37,416,794	\$ 37,470,194	\$ 7,188,656.00	23.74%
6	Prescription Claims 12/31 Renewal	\$ 9,009,944	\$ 13,832,120	\$ 13,832,148	\$ 4,822,204.00	53.52%
7	Prescription Claims 6/30 Renewal	\$ 178,508	\$ 281,981	\$ 281,981	\$ 103,473.00	57.97%
8	Subtotal Prescription Claims	\$ 9,188,452	\$ 14,114,101	\$ 14,114,129	\$ 4,925,677.00	53.61%
9						
10	Lakewood SIR Claims					
11	Medical	\$ 12,500,351	\$ 14,129,943	\$ 14,129,943	\$ 1,629,592.00	13.04%
12	Prescription	\$ 4,437,940	\$ 5,343,124	\$ 5,343,124	\$ 905,184.00	20.40%
13						
14	Less Rx Rebates	\$ (2,756,536)	\$ (4,234,230)	\$ (4,234,239)	\$ (1,477,703.00)	53.61%
15						
16	Dental Claims 12/31 Renewal	\$ 1,896,245	\$ 1,896,295	\$ 1,896,295	\$ 50.00	0.00%
17	Dental Claims 6/30 Renewal	\$ -	\$ -	\$ -	\$ -	0.00%
18	Subtotal Dental Claims	\$ 1,896,245	\$ 1,896,295	\$ 1,896,295	\$ 50.00	0.00%
19	Vision Claims	\$ 45,717	\$ 47,781	\$ 47,781	\$ 2,064.00	4.51%
20						
21	Subtotal Claims	\$ 55,593,707	\$ 68,713,808	\$ 68,767,227	\$ 13,173,520.00	23.70%
22						
23	Medicare Advantage / EGWP	\$ 4,921,143	\$ 5,801,078	\$ 5,801,078	\$ 879,934.56	17.88%
24	Medicare Advantage - Rx	\$ 738,089	\$ 784,729	\$ 784,729	\$ 46,639.44	6.32%
25	DMO Premiums	\$ 4,940	\$ 4,940	\$ 4,940	\$ -	0.00%
26						
27	Reinsurance					
28	Specific	\$ 1,139,670	\$ 1,249,600	\$ 1,249,600	\$ 109,929.66	9.65%
29	Lakewood/Lakewood MUA - ICH	\$ 1,445,927	\$ 1,445,927	\$ 1,445,927	\$ -	0.00%
30	Subtotal Reinsurance	\$ 2,585,597	\$ 2,695,527	\$ 2,695,527	\$ 109,929.66	4.25%
31						
32	Loss Fund Contingency	\$ 234,821	\$ 2,000,000	\$ 2,000,000	\$ 1,765,179.07	751.71%
33						
34	Total Loss Fund	\$ 64,078,298	\$ 80,000,082	\$ 80,053,501	\$ 15,975,202.73	24.93%
35						
36						
37	Expenses					
38	Legal	\$ 37,161	\$ 37,161	\$ 37,161	\$ -	0.00%
39	Treasurer	\$ 13,260	\$ 21,000	\$ 21,000	\$ 7,740.00	58.37%
40	Administrator	\$ 522,613	\$ 522,613	\$ 522,613	\$ -	0.00%
41	Program Manager	\$ 2,052,176	\$ 2,052,176	\$ 2,052,176	\$ -	0.00%
42	Actuary	\$ 17,238	\$ 17,600	\$ 17,600	\$ 362.00	2.10%
43	Auditor	\$ 21,420	\$ 22,000	\$ 22,000	\$ 580.00	2.71%
44	TPA - AmeriHealth	\$ 8,562	\$ 7,763	\$ 7,763	\$ (799.20)	-9.33%
45	TPA - Aetna	\$ 905,922	\$ 786,198	\$ 786,198	\$ (119,723.52)	-13.22%
46	Plan Documents	\$ 15,300	\$ 15,300	\$ 15,300	\$ -	0.00%
47	Dental TPA	\$ 89,134	\$ 89,134	\$ 89,134	\$ -	0.00%
48	Retiree First	\$ 186,336	\$ 186,336	\$ 186,336	\$ -	0.00%
49	Wellness	\$ 150,000	\$ 150,000	\$ 150,000	\$ -	0.00%
50	Affordable Care Act	\$ 11,417	\$ 11,417	\$ 11,417	\$ -	0.00%
51	A4 Retiree Surcharge	\$ 16,618	\$ 16,618	\$ 16,618	\$ -	0.00%
52	Claims Audit	\$ 40,000	\$ 40,000	\$ 40,000	\$ -	0.00%
53	QPA	\$ 3,000	\$ 3,000	\$ 3,000	\$ -	0.00%
54	Misc/Cont	\$ 21,185	\$ 21,185	\$ 21,185	\$ -	0.00%
55						
56	Total Expenses	\$ 4,111,341	\$ 3,999,501	\$ 3,999,501	\$ (111,840.72)	-2.72%
57						
58	Total Budget	\$ 68,189,639	\$ 83,999,582	\$ 84,053,001	\$ 15,863,362.01	23.26%

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	Filed
Fund Officers	Filed
Renewal Resolutions	Filed
Indemnity and Trust	Filed
New Members	Filed
Withdrawals	Filed as Members Withdrawal
Risk Management Plan and By Laws	Filed
Cash Management Plan	Filed
Unaudited Financials	Filed through Year End 2024
Annual Audit	12/31/2024 filed
Budget Changes	N/A
Transfers	N/A
Additional Assessments	N/A
Professional Changes	N/A
Officer Changes	N/A
RMP Changes	N/A
Bylaw Amendments	N/A
Contracts	Filed
Benefit Changes	N/A

RESOLUTION NO. 31-25

**CENTRAL JERSEY HEALTH INSURANCE FUND
(THE "FUND") RESOLUTION TO ENTER INTO CLOSED SESSION**

BE IT RESOLVED by the Executive Committee of the Central Jersey Health Insurance Fund, pursuant to the provisions of the Open Public Meetings Act, that it meet in closed session to discuss the following subject matter:

- Procurement
- Contracts

AND BE IT FURTHER RESOLVED that, as precisely as can be determined at this time, the discussion conducted in the said closed session can be disclosed to the public upon taking final action thereon, provided disclosure shall not violate the attorney-client privilege or constitute an undue invasion of privacy; and

BE IT FURTHER RESOLVED that, the Executive Committee will return to open session after this meeting and may take formal action.

ADOPTED: September 17, 2025

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

CENTRAL JERSEY REGIONAL HEALTH INSURANCE FUND

Program Manager

September 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
- Michele McKeever, mmckeever@permainc.com, 856-479-2160

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.

Open Enrollment – 1/1/26 (Passive):

- CJHIF OE will be held October 20th through October 31st
- All OE updates should be completed in WEX by November 14th to allow time for ID cards to be delivered to members by 1/1/26
- OE guides are currently being updated and will be sent once finalized

Coverage Updates:

Express Scripts:

2025 National Preferred Formulary (NPF)– 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

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

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. **See Appendix.**

Appeals:

Carrier Appeals

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
01/29/25	Medical/ Aetna	CJHIF 2025 01 03	Skilled Nursing	Upheld	05/12/2025
05/15/25	Medical/ Aetna	CJHIF 2025 05 01	Anesthesia	Upheld	06/30/2025
05/30/25	Medical/ Aetna	CJHIF 2025 05 02	Imaging	Upheld	06/30/2025
05/31/25	Medical/ Aetna	CJHIF 2025 05 03	Laboratory Services	Upheld	06/30/2025
06/26/25	Medical/ Aetna	CJHIF 2025 06 01	Anesthesia	Upheld	09/08/2025
08/27/2025	Medical/ Aetna	CJHIF 2025 08 02	Anesthesia	Upheld	09/08/2025
08/28/2025	Medical/ Aetna	CJHIF 2025 08 03	Surgery Reimbursement	Upheld	09/08/2025

IRO Submissions:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
05/12/25	Medical/ Aetna	CJHIF 2025 01 03	Skilled Nursing	Upheld	05/29/2025

05/12/25	Medical/ Aetna	CJHIF 2025 04 01	Laboratory Services	Upheld	05/14/2025
06/30/25	Medical/ Aetna	CJHIF 2025 05 02	Imaging	Overtured	07/11/2025
06/30/25	Medical/ Aetna	CJHIF 2025 05 03	Laboratory Services	Upheld	08/15/2025

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

AUGUST 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>
ABERDEEN TOWNSHIP	2025 DIVIDEND RELEASE 08/25	47,555.00
		47,555.00
	Total Payments FY CLOSED	47,555.00
	TOTAL PAYMENTS ALL FUND YEARS	47,555.00

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

AUGUST 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 HEALTH MANAGEMENT LLC	MEDICARE ADVANTAGE 08/25	523,079.94
		523,079.94
FLAGSHIP DENTAL PLANS	PLUMSTEAD- GRP. 1526 INV 157669 8/1/25	119.39
FLAGSHIP DENTAL PLANS	MONTG.INV 157549 GROUP 1343 8/1/25	301.77
		421.16
AETNA LIFE INSURANCE COMPANY	VISION TPA 08/25	200.20
AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 08/25	77,972.88
		78,173.08
AMERIHEALTH ADMINISTRATORS	WELLNESS CREDITS 08/25	-23.75
AMERIHEALTH ADMINISTRATORS	MEDICAL TPA FEES 08/25	776.91
		753.16
INSPIRA FINANCIAL HEALTH, INC	OCEANPORT HSA 08/25 143010-2081872	138.00
INSPIRA FINANCIAL HEALTH, INC	MRRSA HSA - FOR 7/25 142292-2082902	18.00
		156.00
DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 08/25	7,396.30
		7,396.30
PERMA RISK MANAGEMENT SERVICES	RETIREE FIRST INV 09012025 08/25	14,244.00
PERMA RISK MANAGEMENT SERVICES	ADMIN FEES 08/25	45,216.84
PERMA RISK MANAGEMENT SERVICES	POSTAGE 07/25	76.42
		59,537.26
BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEES 08/25	3,036.00
		3,036.00
MATTHEW J PALMER CONSULTING, LLC	TREASURY SERVICE INV 2025-01 08/25	1,500.00
		1,500.00
STEPHEN MAYER	TREASURER FEE 08/25	1,105.00
		1,105.00
CONNER STRONG & BUCKELEW	PLAN DOCS 08/25	1,275.00
CONNER STRONG & BUCKELEW	NEW MEMBER COMMISSION 08/25	70,090.31
CONNER STRONG & BUCKELEW	PROGRAM MANAGER 08/25	88,688.91
CONNER STRONG & BUCKELEW	DENTAL COMMISSIONS 08/25	372.46
CONNER STRONG & BUCKELEW	FUND COORDINATOR 08/25	5,603.12
CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 08/25	1,949.61
		167,979.41

ACCESS	INV 11698370 DEPT 420 7/31/25	121.34
ACCESS	INV 11646784 DEPT 420 6/30/25	121.34
		242.68
THE CANNING GROUP LLC	QPA SERVICES INV 2025-08 08/25	250.00
		250.00
MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 08/25	99,228.03
		99,228.03
SYMETRA FINANCIAL	SPECIFIC REINSURANCE FEE - SINGLE 08/25	38,119.64
SYMETRA FINANCIAL	AGGREGATE 08/25	4,144.68
SYMETRA FINANCIAL	SPECIFIC REINSURANCE FEE - FAMILY 08/25	79,622.68
		121,887.00
	Total Payments FY 2025	1,064,745.02
	TOTAL PAYMENTS ALL FUND YEARS	1,064,745.02

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

SEPTEMBER 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 HEALTH MANAGEMENT LLC	MEDICARE ADVANTAGE 09/25	467,843.98
		467,843.98
FLAGSHIP DENTAL PLANS	PLUMSTEAD- GRP. 1526 INV 158084	119.39
FLAGSHIP DENTAL PLANS	MONTG. INV 157969 GROUP 1343 9/4/25	301.77
		421.16
AETNA LIFE INSURANCE COMPANY	VISION TPA 09/25	212.03
AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 09/25	75,798.18
		76,010.21
AMERIHEALTH ADMINISTRATORS	WELLNESS CREDITS 09/25	-21.25
AMERIHEALTH ADMINISTRATORS	MEDICAL TPA FEES 09/25	695.13
		673.88
INSPIRA FINANCIAL HEALTH, INC	OCEANPORT HSA 09/25 143010-2091706	138.00
INSPIRA FINANCIAL HEALTH, INC	MRRSA HSA - FOR 8/25 142292-2090154	15.00
		153.00
DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 09/25	7,427.83
		7,427.83
PERMA RISK MANAGEMENT SERVICES	RETIREE FIRST INV 10012025 9/25	16,488.00
PERMA RISK MANAGEMENT SERVICES	ADMIN FEES 09/25	43,464.40
PERMA RISK MANAGEMENT SERVICES	POSTAGE 08/25	75.54
		60,027.94
BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEES 09/25	3,036.00
		3,036.00
MATTHEW J PALMER CONSULTING, LLC	TREASURY SERVICE 09/25	1,500.00
		1,500.00
STEPHEN MAYER	TREASURER FEE 09/25	1,105.00
		1,105.00

CONNER STRONG & BUCKELEW	PLAN DOCS 09/25	1,275.00
CONNER STRONG & BUCKELEW	NEW MEMBER COMMISSION 09/25	69,111.39
CONNER STRONG & BUCKELEW	PROGRAM MANAFER 09/25	84,648.81
CONNER STRONG & BUCKELEW	DENTAL COMMISSIONS 09/25	356.60
CONNER STRONG & BUCKELEW	FUND COORDINATOR 09/25	5,700.29
CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 09/25	1,893.76
		162,985.85
THE CANNING GROUP LLC	QPA SERVICES INV 2025-09 09/25	250.00
		250.00
MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 09/25	95,985.69
		95,985.69
SYMETRA FINANCIAL	SPECIFIC REINSURANCE FEE - SINGLE 09/25	38,796.32
SYMETRA FINANCIAL	AGGREGATE 09/25	4,073.22
SYMETRA FINANCIAL	SPECIFIC REINSURANCE FEE - FAMILY 09/25	76,915.96
		119,785.50
	Total Payments FY 2025	997,206.04
	TOTAL PAYMENTS ALL FUND YEARS	997,206.04

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: June										
	Medical	Dental	Rx	Vision	Reinsurance	DMO Premiums	Dividend Reserve	Admin	0	TOTAL
OPEN BALANCE	(1,109,676.99)	742,258.29	1,941,529.75	80,326.59	(124,587.60)	6,204.45	173,243.46	1,132,051.12	0.00	2,841,349.07
RECEIPTS										
Assessments	3,286,246.07	109,024.36	559,691.59	4,016.34	96,698.81	456.14	0.00	402,775.20	0.00	4,458,908.51
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Invest Pymnts	2,999.43	189.85	1,106.71	20.54	0.00	1.59	44.31	289.56	0.00	4,651.99
Invest Adj	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Subtotal Invest	2,999.43	189.85	1,106.71	20.54	0.00	1.59	44.31	289.56	0.00	4,651.99
Other *	2,948,748.82	(242,058.69)	(2,815,312.60)	17,550.13	(1,141,153.86)	0.00	0.00	3,000,578.69	0.00	1,768,352.49
TOTAL	6,237,994.32	(132,844.48)	(2,254,514.30)	21,587.01	(1,044,455.05)	457.73	44.31	3,403,643.45	0.00	6,231,912.99
EXPENSES										
Claims Transfers	3,844,630.09	109,916.13	1,394,311.73	0.00	0.00	0.00	0.00	0.00	0.00	5,348,857.95
Expenses	455,497.06	421.16	0.00	0.00	209,925.37	0.00	0.00	325,917.37	0.00	991,760.96
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	4,300,127.15	110,337.29	1,394,311.73	0.00	209,925.37	0.00	0.00	325,917.37	0.00	6,340,618.91
END BALANCE	828,190.18	499,076.52	(1,707,296.28)	101,913.60	(1,378,968.02)	6,662.18	173,287.77	4,209,777.20	0.00	2,732,643.15

CERTIFICATION AND RECONCILIATION OF CLAIMS PAYMENTS AND RECOVERIES

Central Jersey Municipal Employee Benefits Fund

Month		June							
Current Fund Year		2025							
		1.	2.	3.	4.	5.	6.	7.	8.
Policy Year	Coverage	Calc. Net Paid Thru Last Month	Monthly Net Paid June	Monthly Recoveries June	Calc. Net Paid Thru June	TPA Net Paid Thru June	Variance To Be Reconciled	Delinquent Unreconciled Variance From	Change This Month
2025	Medical	11,290,640.50	2,405,369.44	0.00	13,696,009.94	0.00	13,696,009.94	11,290,640.50	2,405,369.44
	Dental	636,307.27	109,687.33	0.00	745,994.60	0.00	745,994.60	636,307.27	109,687.33
	Rx	4,972,949.32	1,020,437.74	0.00	5,993,387.06	0.00	5,993,387.06	4,972,949.32	1,020,437.74
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	16,899,897.09	3,535,494.51	0.00	20,435,391.60	0.00	20,435,391.60	16,899,897.09	3,535,494.51

SUMMARY OF CASH AND INVESTMENT INSTRUMENTS				
Central Jersey Municipal Employee Benefits Fund				
ALL FUND YEARS COMBINED				
CURRENT MONTH	June			
CURRENT FUND YEAR	2025			
	Description:	N.J.C.M.F.	Investments	Ocean First Admin.
	ID Number:			
	Maturity (Yrs)			
	Purchase Yield:			
	TOTAL for All			
	Accts & instruments			
Opening Cash & Investment Balance	\$2,841,349.69	0	0	2,841,349.69
Opening Interest Accrual Balance	\$0.00	0	-	0
1	Interest Accrued and/or Interest Cost	\$0.00	\$0.00	\$0.00
2	Interest Accrued - discounted Instr.s	\$0.00	\$0.00	\$0.00
3	(Amortization and/or Interest Cost)	\$0.00	\$0.00	\$0.00
4	Accretion	\$0.00	\$0.00	\$0.00
5	Interest Paid - Cash Instr.s	\$4,652.00	\$0.00	\$4,652.00
6	Interest Paid - Term Instr.s	\$0.00	\$0.00	\$0.00
7	Realized Gain (Loss)	\$0.00	\$0.00	\$0.00
8	Net Investment Income	\$4,652.00	\$0.00	\$4,652.00
9	Deposits - Purchases	\$6,227,260.10	\$0.00	\$6,227,260.10
10	(Withdrawals - Sales)	-\$6,340,618.91	\$0.00	-\$6,340,618.91
	Ending Cash & Investment Balance	\$2,732,642.88	\$0.00	\$2,732,642.88
	Ending Interest Accrual Balance	\$0.00	\$0.00	\$0.00
	Plus Outstanding Checks	\$969,760.96	\$0.00	\$969,760.96
	(Less Deposits in Transit)	\$0.00	\$0.00	\$0.00
	Balance per Bank	\$3,702,403.84	\$0.00	\$3,702,403.84



CENTRAL JERSEY HEALTH INSURANCE FUND

Monthly Claim Activity Report

September 17, 2025



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	\$4,886,244	1,819	\$ 2,686
MAY	\$3,785,711	2,305	\$ 1,642	\$4,872,695	1,822	\$ 2,674
JUNE	\$4,376,641	2,301	\$ 1,902	\$3,853,977	1,827	\$ 2,109
JULY	\$4,393,165	2,303	\$ 1,908	\$4,384,783	1,905	\$ 2,302
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			\$29,339,626		
				2025 Average	1,835	\$ 2,285
				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: 06/01/2025 - 06/30/2025
Service Dates: 01/01/2011 - 06/30/2025
Line of Business: All

	Paid Amt	Diagnosis/Treatment
	\$136,141.30	Other toxic encephalopathy
Total:	\$136,141.30	

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: 07/01/2025 - 07/31/2025
Service Dates: 01/01/2011 - 07/31/2025
Line of Business: All

	Paid Amt	Diagnosis/Treatment
	\$204,148.09	NONRHEUMATIC MITRAL (VALVE) INSUFFICIENCY
	\$203,651.46	INTESTINAL ADHESIONS (BANDS), UNSPECIFIED AS
	\$124,166.41	ACUTE DUODENAL ULCER WITH BOTH HEMORRHAGE
Total:	\$531,965.96	



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

Total Medical Paid per EE: **\$2,285**

Network Discounts

Inpatient: **55.2%**
Ambulatory: **65.6%**
Physician/Other: **67.6%**
TOTAL: 64.4%

Provider Network

% Admissions In-Network: **96.2%**
% Physician Office: **92.1%**

Aetna Book of Business:

Admissions 98.4%; Physician 90.3%

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

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

**Catastrophic Claim Impact
January 2025 – July 2025**

Number of Claims Over \$50,000 **70**
Claimants per 1000 members: **15.9**
Avg. Paid per Claimant: **\$148,461**
Percent of Total Paid: **38.7%**

- Aetna BOB- HCC account for an average of 45.1% of total Medical Cost

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

Total Members Identified: **1,467**
Members Targeted for 1:1 Nurse Support : **337**
Members Targeted for Digital Activity: **1,090**
Member 1:1 outreach completed: **338**
Member 1:1 Outreach in Progress: **68**

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

Completed Visits in March: **20**
Unique Patients in March: **20**
Completed Visits in 2025 : **111**
Unique Patients in 2025: **85**
Total Scheduled Visits in 2025: **142**
Average visit duration: **10 Minutes**
BoB: Average First Available: **31 minutes**
BoB: Average First Available 6am-6pm: **28 Minutes**

**Service Center Performance Goal
Metrics YTD 2024**

Customer Service Performance

1st Call Resolution: **93.85%**
Abandonment Rate: **0.52%**
Avg. Speed of Answer: **14.9 sec**

Claims Performance

Financial Accuracy: **97.95%***
*Q1 2025

90% processed w/in: **8.4 days**
95% processed w/in: **15.3 days**

**Claims Performance (Monthly)
(July 2025)**

90% processed w/in: **6.8 days**
95% processed w/in: **15.3 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**







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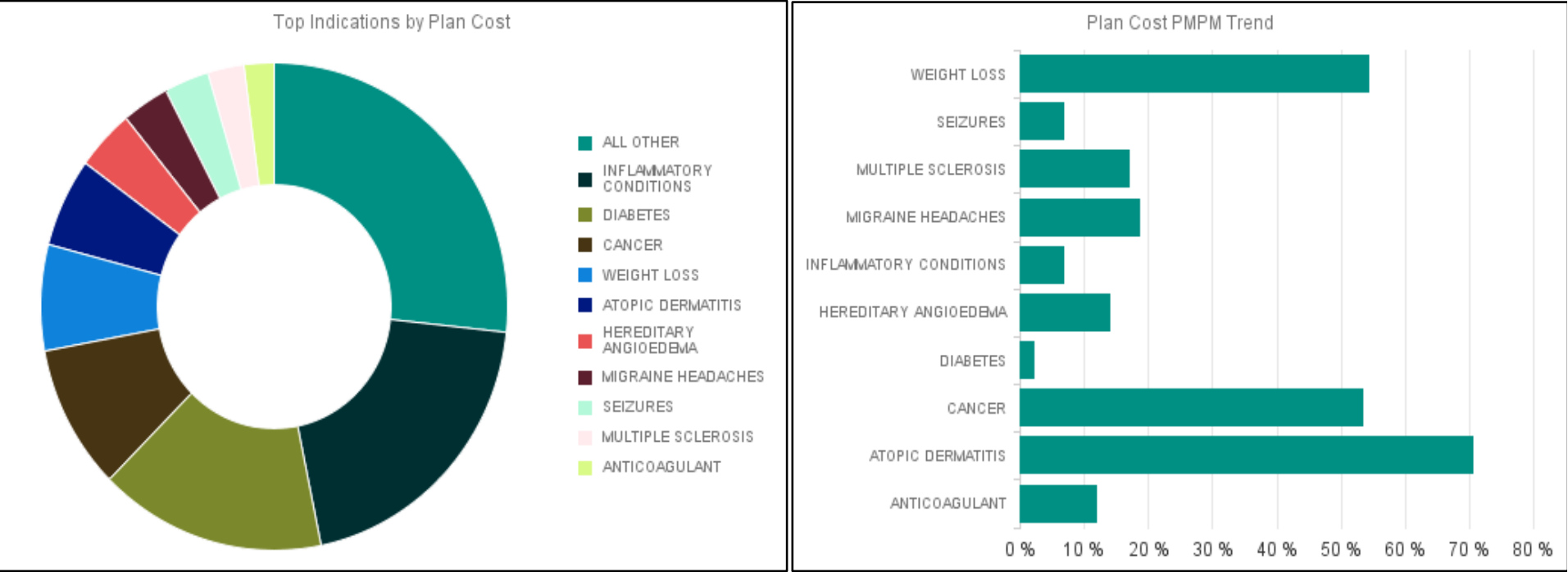
Central Jersey Health Insurance Fund

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	2024 YTD
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	3,190
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	1,549,271
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	2,758
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	\$10,322,562
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%	85.2%
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	\$269.62
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	\$4,920,342
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%	47.7%

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	2025 YTD
Membership	3,326	3,321	3,324	3,324	3,317	3,298	3,290	3,302	3,509								
Total Days	143,205	125,837	141,987	411,029	134,955	131,000	132,507	398,462	143,115								
Total Patients	1,321	1,259	1,259	1,978	1,209	1,173	1,205	1,861	1,266								
Total Plan Cost	\$963,783	\$858,477	\$995,365	\$2,817,624	\$1,050,355	\$999,992	\$985,208	\$3,035,555	\$1,003,399								
Generic Fill Rate (GFR) - Total	87.0%	86.5%	85.7%	86.4%	86.0%	84.9%	84.5%	85.2%	85.7%								
Plan Cost PMPM	\$289.77	\$258.50	\$299.45	\$282.58	\$316.66	\$303.21	\$299.46	\$306.47	\$285.95								
% Change Plan Cost PMPM	16.7%	6.1%	19.7%	14.2%	31.0%	11.7%	9.4%	16.6%	-2.3%								
Total Specialty Plan Cost	\$486,534	\$418,595	\$535,098	\$1,440,227	\$552,356	\$511,494	\$493,507	\$1,557,358	\$491,008								
Specialty % of Total Specialty Plan Cost	50.5%	48.8%	53.8%	51.1%	52.6%	51.1%	50.1%	51.3%	48.9%								

Top Indications

CENTRAL JERSEY HEALTH INSUR. (Current Period 01/2025 - 07/2025 vs. Previous Period 01/2024 - 07/2024) Peer = Government - National Preferred Formulary



			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	27.4 %	316	\$1,377,696	\$58.91	36.7 %	30.3 %	30.5 %	283	\$1,210,670	\$55.20	42.4 %	33.9 %	6.7 %		
2	1	DIABETES	21.4 %	2,817	\$1,076,004	\$46.01	29.2 %	23.9 %	24.9 %	2,909	\$987,494	\$45.02	28.0 %	25.8 %	2.2 %		
3	3	CANCER	13.1 %	236	\$658,437	\$28.16	77.1 %	75.6 %	10.2 %	132	\$403,039	\$18.38	82.6 %	76.2 %	53.2 %		
4	4	WEIGHT LOSS	9.6 %	463	\$481,904	\$20.61	1.9 %	4.1 %	7.4 %	293	\$292,813	\$13.35	3.4 %	5.5 %	54.4 %		
5	5	ATOPIC DERMATITIS	8.1 %	435	\$404,842	\$17.31	69.9 %	80.6 %	5.6 %	366	\$222,753	\$10.16	78.7 %	84.2 %	70.5 %		
6	10	HEREDITARY ANGIOEDEMA	5.5 %	6	\$277,051	\$11.85	0.0 %	9.0 %	5.7 %	8	\$227,925	\$10.39	0.0 %	12.6 %	14.0 %		
7	6	MIGRAINE HEADACHES	4.5 %	267	\$223,957	\$9.58	30.0 %	51.3 %	4.5 %	240	\$177,298	\$8.08	35.0 %	52.6 %	18.5 %		
8	9	SEIZURES	4.2 %	687	\$212,366	\$9.08	88.2 %	96.9 %	4.7 %	663	\$186,662	\$8.51	89.4 %	96.8 %	6.7 %		
9	7	MULTIPLE SCLEROSIS	3.4 %	34	\$171,800	\$7.35	26.5 %	48.2 %	3.5 %	23	\$137,870	\$6.29	26.1 %	47.5 %	16.9 %		
10	8	ANTICOAGULANT	2.8 %	291	\$142,992	\$6.11	13.1 %	18.5 %	3.0 %	254	\$119,864	\$5.47	10.6 %	19.3 %	11.9 %		
Total Top 10				5,552	\$5,027,049	\$214.97	39.0 %	39.8 %		5,171	\$3,966,388	\$180.84	39.7 %	42.3 %	18.9 %		

Top Drugs

CENTRAL JERSEY HEALTH INSUR. (Current Period 01/2025 - 07/2025 vs. Previous Period 01/2024 - 07/2024) 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	7	STELARA	INFLAMMATORY CONDITIONS	Y	26	4	\$440,280	\$18.83	26	5	\$380,152	\$17.33	8.6 %
2	8	ZEPBOUND	WEIGHT LOSS	N	308	60	\$312,644	\$13.37	147	29	\$138,311	\$6.31	112.0 %
3	4	OZEMPIC	DIABETES	N	323	56	\$300,430	\$12.85	409	66	\$352,023	\$16.05	-20.0 %
4	29	HUMIRA(CF) PEN	INFLAMMATORY CONDITIONS	Y	36	5	\$279,120	\$11.94	41	6	\$299,992	\$13.68	-12.7 %
5	305	ORLADEYO	HEREDITARY ANGIOEDEMA	Y	6	1	\$277,051	\$11.85	1	1	\$43,976	\$2.01	490.9 %
6	9	DUPIXENT PEN	ATOPIC DERMATITIS	Y	72	12	\$247,037	\$10.56	45	9	\$140,128	\$6.39	65.3 %
7	1	MOUNJARO	DIABETES	N	225	42	\$228,100	\$9.75	83	16	\$81,344	\$3.71	163.0 %
8	11	SKYRIZI PEN	INFLAMMATORY CONDITIONS	Y	25	5	\$170,122	\$7.27	22	3	\$134,837	\$6.15	18.3 %
9	49	VERZENIO	CANCER	Y	12	2	\$165,636	\$7.08	NA	NA	NA	NA	NA
10	12	WEGOVY	WEIGHT LOSS	N	131	35	\$162,932	\$6.97	124	30	\$146,060	\$6.66	4.6 %
11	46	KISQALI	CANCER	Y	9	1	\$131,889	\$5.64	NA	NA	NA	NA	NA
12	14	RINVOQ	INFLAMMATORY CONDITIONS	Y	15	2	\$122,568	\$5.24	15	2	\$79,927	\$3.64	43.8 %
13	22	ELIQUIS	ANTICOAGULANT	N	203	37	\$110,717	\$4.73	156	29	\$83,165	\$3.79	24.9 %
14	110	NUBEQA	CANCER	Y	10	1	\$100,813	\$4.31	NA	NA	NA	NA	NA
15	235	HUMIRA PEN	INFLAMMATORY CONDITIONS	Y	10	2	\$97,027	\$4.15	13	3	\$160,662	\$7.33	-43.4 %
16	190	CALQUENCE	CANCER	Y	6	1	\$93,657	\$4.00	NA	NA	NA	NA	NA
17	98	DASATINIB	CANCER	Y	6	1	\$93,584	\$4.00	NA	NA	NA	NA	NA
18	23	FARXIGA	DIABETES	N	161	25	\$89,715	\$3.84	186	26	\$97,639	\$4.45	-13.8 %
19	36	DUPIXENT SYRINGE	ATOPIC DERMATITIS	Y	26	4	\$83,190	\$3.56	21	4	\$53,838	\$2.45	44.9 %
20	10	JARDIANCE	DIABETES	N	141	21	\$81,470	\$3.48	136	21	\$74,355	\$3.39	2.8 %
21	33	NURTEC ODT	MIGRAINE HEADACHES	N	55	15	\$80,117	\$3.43	52	12	\$69,949	\$3.19	7.4 %
22	47	UBRELVY	MIGRAINE HEADACHES	N	64	20	\$73,808	\$3.16	35	12	\$39,751	\$1.81	74.1 %
23	31	SKYRIZI ON-BODY	INFLAMMATORY CONDITIONS	Y	8	1	\$72,443	\$3.10	NA	NA	NA	NA	NA
24	129	ZEPOSIA	MULTIPLE SCLEROSIS	Y	10	2	\$66,268	\$2.83	8	1	\$58,385	\$2.66	6.5 %
25	210	BRIVIACT	SEIZURES	N	22	4	\$53,653	\$2.29	7	1	\$28,580	\$1.30	76.1 %
Total Top 25					1,910		\$3,934,269	\$168.24	1,527		\$2,463,074	\$112.30	49.8 %

01/2025 - 07/2025	Approved PA Count	Denied PA Count	TOTAL PA count
Wegovy	21	31	52
Zepbound	38	31	69
	59	62	121
01/2024 - 07/2024	Approved PA Count	Denied PA Count	TOTAL PA count
Wegovy	29	9	38
Zepbound	33	8	41
	62	17	79





Wellness Perks



Who qualifies for this enhancement?

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How do Wellness Perks add value for members?

- Helps members save money on recognizable brands for oral health, hearing care, and lifestyle needs
- Promotes year-round wellness for members and their families
- Increases member satisfaction and engagement with their benefits package

Where can I find more information?

- DeltaDentalNJ.com/Perks
- DeltaDentalCT.com/Perks

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Delta Dental of New Jersey
Delta Dental of Connecticut
09-2025



Hearing Savings Program with complimentary access to significant savings on hearing aids and services



A comprehensive savings marketplace with member discounts and deals on everything from flights and groceries to electronics and entertainment



Exclusive discounts on Oral-B electric toothbrushes, replacement brush heads, water flossers, and more



Special pricing on a range of products, including Philips Sonicare, Avent mother-and-baby products, and Norelco shaving and grooming products



Discounts on curated children's oral health kits



Protect smiles with ADA-accepted, Delta Dental-branded mouthguards



Exclusive savings on toothbrush and mouthguard shields

**CENTRAL JERSEY HEALTH INSURANCE FUND
CONSENT AGENDA
September 17, 2025**

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 32-25: 2026 Budget Introduction.....	Page 39
Revised Resolution 7-25: Designation of Authorized Signatories	Page 40
Resolution 33-25: New Member Approval	Page 41
Resolution 34-25: August and September 2025 Bills List	Page 42

RESOLUTION NO. 32-25

**CENTRAL JERSEY HEALTH INSURANCE FUND
INTRODUCTION OF THE 2026 PROPOSED BUDGET**

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

WHEREAS, a quorum of the Executive Committee met on September 17, 2025 in Public Session to introduce the proposed budget for the 2026 Fund Year; and

BE IT FURTHER RESOLVED that a hearing on the 2026 budget in the amount of **\$84,053,001** shall be held at the Fund's regularly scheduled and advertised meeting of October 15, 2025 to be held via Zoom Meeting. The 2026 budget shall be considered for adoption at a second reading at that time and after the completion of a public hearing.

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

ADOPTED: September 17, 2025

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

REVISED RESOLUTION NO. 7-25

**CENTRAL JERSEY HEALTH INSURANCE FUND
RESOLUTION DESIGNATING
AUTHORIZED SIGNATURES FOR FUND BANK ACCOUNTS**

BE IT RESOLVED by the Central Jersey Health Insurance Fund that all funds of the Central Jersey Health Insurance Fund shall be withdrawn from the official depositories by check, which shall bear the signatures of at least two (2) of the following persons who are duly authorized pursuant to this Resolution.

Thomas Nolan - Chairperson

Brian Brach - Secretary

Matt Palmer - Treasurer

ADOPTED: SEPTEMBER 17, 2025

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

RESOLUTION NO. 33-25

**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 **September 17, 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 Delaware River Basin Commission 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

Delaware River Basin Commission – Mercer County – Effective 11/1/2025

BE IT RESOLVED, it has been determined that the admission to membership in the Fund of Delaware River Basin Commission 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: SEPTEMBER 17, 2025

BY: _____
CHAIRPERSON

ATTEST: _____
SECRETARY

RESOLUTION NO. 34-25

**CENTRAL JERSEY HEALTH INSURANCE FUND
APPROVAL OF THE AUGUST AND SEPTEMBER 2025 BILLS LISTS**

WHEREAS, the Central Jersey Health Insurance Fund held a Public Meeting on SEPTEMBER 17, 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 August and September 2025 and supplemental bills lists 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 July 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 August and September 2025 and Supplemental Bills lists 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: SEPTEMBER 17, 2025

BY: _____
CHAIRPERSON

ATTEST: _____
SECRETARY

APPENDIX I

CENTRAL JERSEY HEALTH INSURANCE FUND
OPEN MINUTES
July 16, 2025
ZOOM MEETING
1:30 PM

Meeting called to order by Chair Thomas Nolan. 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		
Brian Valentino	Western Monmouth MUA	Absent
Bryan Dempsey	Spring Lake Borough	Present
Peter O'Reilly	Borough of Lakewood	Present
James Gant	Red Bank	Absent
Jason Gonter	West Long Branch Twp	Absent
ALTERNATES:		
James Tricarico	Bedminster Twp	Present
Tom Flarity	Borough of Manasquan	Absent

APPOINTED OFFICIALS PRESENT:

Executive Director/ Administrator	PERMA Risk Management Services	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	Megan Natale	Present
Dental Claims Service	Delta Dental	Crista O'Donnell	Present
Rx Administrator	Express Scripts	Hiteksha Patel	Present

OTHERS PRESENT:

Alison Kelly	Rob Ferragina	Barbara Vilanova	Jim Diaz
Brian Kiely	David Balken	Matt Rudman	Lori Savron
Cindy Toye	R Dunn	Charles Casagrande	Oxygen Benefits
Lindsay Klein	Dominick Cinelli	Donna Phelps	
Tyler Jackson	Ian Dalton	Jeanette Larrison	
Scott Davenport	John Lajewski	William Quinonez	

MOTION TO APPROVE OPEN MINUTES OF MAY 21, 2025, OPEN:

MOTION:	Commissioner Brach
SECOND:	Commissioner Dempsey
VOTE:	All in Favor

EXECUTIVE DIRECTOR REPORT

PRO FORMA REPORTS – Ms. Koval noted the report will be focused on the financials, which we’ve previously discussed. There are three Financial Fast Track’s that have been provided since we last met, where each of these show a surplus deficit, which corresponds to market trend challenges that we have been facing.

NO SURPRISES ACT (NSA) LEGISLATION CLAIMS - Ms. Koval provided an overview of the No Surprises Act, a law that took effect in 2022. She explained that the legislation was originally intended to protect patients from unexpected medical bills, particularly in emergency and out-of-network scenarios, such as receiving care from an out-of-network anesthesiologist during a procedure at an in-network hospital. Unfortunately, the Fund has recently found that there are claims being paid with significant differences from claims that occurred in prior years of 2022 to 2024. Ms. Koval noted these claims were not anticipated or accounted for in the budgets as we were unaware these claims were being held for arbitration. At this time, there is no reliable way to determine the full extent of the Fund’s exposure related to these claims. She also pointed out that Toms River, who exited the Fund last year, had a significant amount of run out associated with NSA claims. She emphasized that this is not solely a CJHIF or Aetna issue, but a broader challenge that is affecting the entire State and market but it is impacting the 2025 budget.

In response to Mr. Tricarico’s question about whether we can pay them on a scheduled basis, Ms. Koval explained that the challenge is the negotiation process presents two options, both which is paid from the Fund. She added that claims are being processed in batches, but there has been no option to pay them overtime or on a set schedule.

Mr. Silverstein noted that the No Surprises Act operates under a binding arbitration process. Providers have recognized that they can propose high reimbursement amounts and are winning about 85% of the time, which has encouraged them to continue requesting inflated payments. The law also requires payments be made within thirty days. In response to Chair Nolan, Mr. Silverstein mentioned that there are currently several lawsuits and lobbying efforts underway to challenge this

issue. Ms. Koval added that PERMA is drafting a letter for lobbying efforts as well and will be shared once finalized.

Ms. Koval also pointed out that while the No Surprises Act has the most significant impact at the moment, the rising costs of GLP-1 medications and cancer treatments are also contributing to budgetary pressures. Additionally, the recent Hackensack Meridian contract renewal included record-high-rate increases, both in January and again in July 2025. This is expected to further affect claims, especially given the size and usage of that facility within the Fund. Ms. Koval mentioned the cash is being monitored on a daily basis and that monthly payments to our third-party vendors continue to be on schedule. She noted that a new Fund Treasurer will assume the role in August, and a lockbox will be established for incoming payments. Additional details will be shared once it is implemented. She also reported that monthly invoices continue to be processed on schedule and encourages members to utilize ACH payments when possible, as it supports better cash flow management. Additionally, the Fund will transition from a claims pull process to a claims push model to allow greater control. She mentioned while supplement assessments may become necessary, they are not being recommended at this time as the Fund continues to be closely monitored.

Commissioner Brach expressed concern about the Fund's cash flow, noting the situation is critical and any potential supplemental assessments would require advance notice, as member entities must follow specific budgetary guidelines for transfers. Ms. Koval acknowledged this, stating any supplemental assessment would require both an introduction and adoption and that the Fund understands the need to allow sufficient lead time for members to prepare. She also mentioned that emergency funding provisions exist within current legislation, should they become necessary. In the meantime, the Fund will continue to monitor the situation closely and keep the members informed.

MRHIF UPDATE- Ms. Koval reported that MRHIF did release the dividend, which the Fund has already received and has helped with the cash position. Commissioner Brach noted that MRHIF is also concerned with the No Surprises Act as well and echoed that this is a market and Statewide issue.

FUND TREASURER - Ms. Koval reported that there were two responses for the Fund Treasurer and the recommendation from the Contracts Committee is Matthew Palmer, starting on August 1st, 2025, through December 31, 2026. Chair Nolan commented that they did their due diligence and felt that Mr. Palmer was the best fit for the Fund. She thanked Mr. Steve Mayer for his time.

CLAIMS TRANSACTIONS - Ms. Koval discussed the recommendation for the Fund to move from a claim push than a pull to have further control over the cash flow, highlighting there is only a fee if the Fund is payments are late. This will be revisited in 2026.

MOTION TO TRANSITION THE CLAIMS PAYMENT PROCESS TO BE INITIATED BY THE FUND TREASURER:

MOTION:	Commissioner Brach
SECOND:	Commissioner Dempsey
VOTE:	All in Favor

FUND QUALIFIED PURCHASING AGENT (QPA) - Ms. Koval reported only one response was received for the QPA, submitted by The Canning Group, LLC, through the end of 2025. Given the limited number of RFP's this year, it is recommended to move forward with a contract with The Canning Group.

QPA THRESHOLD - Ms. Koval noted that Mr. Sean Canning, from the Canning Group, LLC, is recommending the adoption of Resolution 27-25 which acknowledges the increase of the minimum bid threshold from the State Treasurer.

2025 WELLNESS GRANT APPLICATIONS - Ms. Koval stated that Aberdeen Township has submitted their 2025 wellness grant, who is active in the wellness program and whose application includes similar programs and initiatives as previously approved grants.

COOPERATIVE PURCHASING SYSTEM - MEDICAL TPA BID - Ms. Koval reported that the Cooperative recently held a public hearing regarding the prequalification regulations for the upcoming Medical TPA RFP. A certified copy of the regulations has been submitted and is currently awaiting approval from the Office of the State Comptroller, which is required within 30 days. A meeting with the CJHIF representative will be scheduled once additional information becomes available.

PCORI AND A4 SURCHARGE FEES - Ms. Koval reminded the Fund will be paying the PCORI and A4 Surcharge fees on behalf of the Fund members in the month of July.

MEL/MRHIF EDUCATIONAL SEMINAR PRESENTATION - As a follow up, Joe DiBella and Tammy Brown, from Conner Strong & Buckelew, hosted a second webinar presentation following the MEL/MRHIF Education Seminar. The discussion focused on newer, material cost drivers for GLP-1 medications and the rising out of-of-network providers experienced by the public sectors. The presentation was sent out as an attachment to the agenda. If you were not able to attend, the recording can be viewed by clicking [here](#) or visiting the CJHIF website.

I&T AGREEMENTS - Ms. Koval noted those groups who have outstanding I&T agreements.

PROGRAM MANAGER'S REPORT - Ms. Bailey reviewed the following items:

WEX COBRA/Direct Bill Administration Update - Effective 7/1/2025

Effective July 1, 2025, WEX will be transitioning all COBRA and Direct Bill members from the BenefitExpress platform to their WEX Health Inc. (WEX) platform. WEX is a parent company of BenefitExpress and this update will ensure participants have access to their most enhanced platform, resources and support services.

Please note the following:

- Takeover/Welcome Notice to current participants will be sent starting **June 26th through July 15th (Sent by WEX)**

- Date range reflects notices will be sent to members after their June premium payment is processed
- The notice will include new coupons, instructions on WEX account setup and new mailing address for future payments
- Termination Notice to current participants will be sent to starting **July 7th through July 15th (Sent by WEX on behalf of BenefitExpress)**
 - Notices will be sent after service through BenefitExpress expires and after the participant is issued their Takeover/Welcome Notice
 - Reference to the Termination Notice is mentioned in the Takeover/Welcome Notice

Please note to remain compliant both the Takeover/Welcome Notice and Termination Notice must be sent to all current participants, there is not an option to suppress the termination notice.

Attached is a sample of the Takeover/Welcome Notice that current participants will receive explaining the transition. Please note the following:

- WEX will transfer the participant's current contact information as it noted in BenefitExpress
- WEX will transfer all active ACH accounts to the new platform and are expected to complete the process by July 1st
 - If a participant signs into the portal and it still reflects the BenefitExpress logo information, their account has not yet been transitioned. They can call into WEX using the contact information on the attached to have their account updated. We recommend they allow time for the transition as the ACH will occur once the transition is complete; June payment is received and
- Participants who send their payments to WEX via US Mail will have a new remittance address to submit future payments, as outlined in the attached letter
 - We are currently confirming if July payments that have already been mailed will be transferred to the new PO Box and are being applied to participants accounts with WEX

WEX is prepared to accept calls from participants and answer questions they have related to the transition, their account set up status, payment status, etc.

PLEASE NOTE: Participants' coverage will not be terminated if they experience an issue due to the transition.

New groups joining the HIFs effective 7/1/25 and after will be on the WEX platform all other groups prior to 7/1/25 will be transitioned to the new platform as outlined above

**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

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

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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

2023 Specialized Audits - no updated

Appeals:

Carrier Appeals

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
01/29/25	Medical/ Aetna	CJHIF 2025 01 03	Skilled Nursing	Upheld	05/12/2025
04/04/25	Medical/ Aetna	CJHIF 2025 04 01	Laboratory Services	Upheld	05/12/2025
05/15/25	Medical/ Aetna	CJHIF 2025 05 01	Anesthesia	Upheld	06/30/2025
05/30/25	Medical/ Aetna	CJHIF 2025 05 02	Imaging	Upheld	06/30/2025
05/31/25	Medical/ Aetna	CJHIF 2025 05 03	Laboratory Services	Upheld	06/30/2025

IRO Submissions:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
05/12/25	Medical/ Aetna	CJHIF 2025 01 03	Skilled Nursing	Under Review	
05/12/25	Medical/ Aetna	CJHIF 2025 04 01	Laboratory Services	Upheld	05/14/2025
06/30/25	Medical/ Aetna	CJHIF 2025 05 02	Imaging	Under Review	
06/30/25	Medical/ Aetna	CJHIF 2025 05 03	Laboratory Services	Under Review	

TREASURER – Fund Treasurer reviewed the June and July 2025 bills list included in the agenda. Fund Treasurer continued to review the summary of the cash transactions. Mr. Mayer commented it has been a pleasure serving the Fund from its very beginning.

ATTORNEY – No report.

AETNA – Mr. Silverstein reviewed the report in the agenda, highlighting the April and May claims per employee per month. He noted there were three high claimants for the month of April and four high claimants above the threshold for the month of May. He commented that the dashboard metrics continue to perform well. Mr. Silverstein provided a network update, stating a contract continuation was reached with Robert Wood Johnson Hospital which went into effect as of April 1, 2025, with no disruption.

AMERIHEALTH - Ms. Natale reviewed the claims for the month of May 2025, noting the average claims per employee. She stated there was one high-cost claimants for the month of May, which was not included in the agenda.

EXPRESS SCRIPTS – Ms. Patel reviewed the monthly utilization report for May 2025, noting the generic fill rate is 85%. She reviewed the top 10 indications for 2025, noting there is a substantial decrease in plan costs in weight loss and multiple sclerosis category but an increase in seizures and cancer. She reported on the top 25 drugs overall, stating there are two new drugs that are being prescribed which does not have any comparable data from the previous period.

DELTA DENTAL – Ms. O'Donnell reviewed the report in the agenda, noting that it is a behavioral report for the calendar year of 2024. She noted that there is strong data showing routine services with members in the Fund.

MOTION TO APPROVE CONSENT AGENDA, INCLUDING RESOLUTION 26-25 TO 30-25:

MOTION:	Commissioner Brach
SECOND:	Commissioner Dempsey
VOTE:	All in Favor

OLD BUSINESS - None.

NEW BUSINESS – None.

MOTION TO OPEN THE MEETING TO THE PUBLIC:

MOTION:	Commissioner Dempsey
SECOND:	Commissioner O'Reilly
VOTE:	All in Favor

PUBLIC COMMENT – None.

MOTION TO CLOSE THE MEETING TO THE PUBLIC:

MOTION:	Commissioner Dempsey
SECOND:	Commissioner O'Reilly
VOTE:	All in Favor

MOTION TO ADJOURN THE MEETING:

MOTION:	Commissioner Dempsey
SECOND:	Commissioner O'Reilly
VOTE:	All in Favor

MEETING ADJOURNED: 2:12pm

Next Meeting: September 17, 2025, at 1:30 pm, Zoom Meeting

Minutes Prepared by: Caitlin Perkins, Assisting Secretary

CJHIF Finance Committee Meeting Minutes
9/12/2025 - 2:00 PM

Attendees:

Thomas Nolan, Committee Chair
Brian Brach, Committee Member
Bryan Dempsey, Committee Member
Brandon Lodics, Executive Director
Emily Koval, Associate Executive Director
John Lajewski, Program Manager
Matthew Rudman, Conner Strong & Buckelew Actuary

Mrs. Koval began the discussion by confirming with Chair Nolan that she could proceed with the agenda. She then presented the financial fast track report for the first half of the year, highlighting a loss of approximately \$500,000, which has been consistent with prior months. Losses were primarily concentrated among Central Jersey members, while Lakewood showed a slight surplus increase for the month but an overall annual loss. The Fund currently holds a \$1.3 million surplus and a cash position of \$2.7 million as of June. Ms. Koval also noted the successful transition between treasurers, with the new Treasurer Matt Palmer assuming full access to bank accounts and providing regular updates on cash positions and outstanding member payments. Chair Nolan acknowledged the smooth transition and praised the new treasurer's knowledge and collaboration with the accounting staff. Ms. Koval informed the committee that the former treasurer, had been compensated for August and September for his transitional work. She confirmed this would likely be the final voucher submitted by him.

Ms. Koval introduced the draft budget, emphasizing its preliminary nature. The total budget reflects a 24.03% increase, which aligns with broader industry trends. She explained that medical claims are projected to increase by 25%, while prescription claims showed a significant 55.42% increase due to both industry-wide trends and a correction in prior census data provided to the actuary. The correction involved removing fully insured Medicare lives from the projection, which had previously understated per-employee prescription costs. Regarding Lakewood, Ms. Koval noted that Lakewood MUA was previously rated with Lakewood but joined the rest of the Fund in 2025, therefore their claims are removed from the Lakewood population. Lakewood's medical claims are projected to increase by 13%, and prescription claims by 20%. Dental claims remain flat.

Additionally, Ms. Koval recommended a \$2 million loss fund contingency to build surplus reserves. Chair Nolan and Mr. Brach supported the inclusion of the loss fund contingency, recognizing its importance for long-term stability. Although, Mr. Lodics stated that the contingency line cannot be more than 2.5% of the whole budget.

Mr. Brach raised the possibility of implementing a special assessment to address deficits. Ms. Koval and Mr. Lodics explained that while the budget includes a 2.5% contingency, the need for a supplemental assessment may arise depending on future financial performance.

Mr. Lajewski provided an overview of factors driving cost increases, including rising unit costs due to hospital negotiations, increased frequency of services, aging populations, technological advancements, and cost-shifting from federal programs like Medicare and Medicaid to private insurers. Mr. Lodics highlighted the impact of hospital consolidations, particularly the Hackensack Meridian deal, which has significantly increased costs in the Central Jersey region.

The conversation shifted to potential plan design reforms to mitigate rising costs. Suggestions included adjusting out-of-network fee schedules to encourage in-network utilization, exploring reduced network options such as Aetna's Whole Health network (which offers 8-10% savings), and considering reference-based pricing and other innovative solutions. Mr. Brach and Mr. Dempsey emphasized the importance of engaging employees and unions in discussions about plan design changes, noting a shift in employee willingness to negotiate due to rising premiums.

The committee agreed to introduce the budget at the next meeting, with assessments to be finalized afterward. Ms. Koval clarified that the introduction would focus on the overall budget, with detailed assessments to follow after further analysis. Chair Nolan and Mr. Brach supported moving forward with the current projections, noting the importance of providing timely information to municipalities preparing their budgets. Mr. Dempsey suggested hosting a workshop or webinar to discuss plan design options and strategies with commissioners. Mr. Lajewski agreed to prepare a presentation and circulate materials for further discussion.

Ms. Koval highlighted reductions in administrative expenses, including a 13% reduction in Aetna's rates following negotiations and the continuance of existing contracts without increases for Perma and Connor Strong. These reductions contributed to an overall 2.72% decrease in expenses. Chair Nolan summarized the key decisions and next steps, including introducing the budget at the next meeting, conducting further analysis and adjustments to assessments before adoption, and scheduling a workshop on plan design reform. Ms. Koval thanked the committee for their input and reiterated the importance of clear communication with members regarding the budget and assessments.

APPENDIX II

Matthew J. Palmer

EDUCATION: **SETON HALL UNIVERSITY; South Orange, NJ**
Bachelor of Science Degree-1996, Major: Accounting and Taxation

RUTGERS UNIVERSITY; New Brunswick, NJ
Municipal Tax, Finance, Purchasing Programs
Certified NJ Tax Collector, T-8238,
Certified NJ Finance Officer, N-1709

WORK EXPERIENCE:
12/24-present

BOROUGH OF RUMSON; BOROUGH OFFICE
Chief Finance Officer/Acting Qualified Purchasing Agent

Supervise the entire finance operations but not limited to the following:
Finance – bill list, banking, budget, resolutions, ordinances
Tax Collection – tax levy, sewer, sanitation payments, adjustments & reports
Purchasing (bids, cooperatives, purchase orders)
Payroll (semi-monthly approval, deductions, reports, and leave reporting)
LOSAP (reports, resolution and other paperwork)
Yearly Audit (reports, schedules and emails)

Work with the Borough Administrator and finance committee to develop a \$21.5M budget and tax levies certifications

Supervise the reporting and payment of NJSHB and pensions (PFRS/PERS) quarterly.

Other duties as assigned by the borough administrator which include OPRA requests and insurance related claims

3/21-11/24

BOROUGH OF MONMOUTH BEACH; BOROUGH OFFICE
Chief Finance Officer/Tax Collector

Supervise the tax collection of the borough along with bank deposits and armor car pickup service.

Handle all the finance duties of the borough including approving electronic requisition/purchase orders and wire bank payments. Supervise payment and reporting for NJSHB and pensions (PERS/PFRS).

Reconcile all bank accounts including the current fund, payroll fund, and all trust accounts. Reviewed payroll every 2 weeks before it was placed into production.

Initiated green techniques for both tax collection and finance

Work with bond counsel and financial advisors on bond ordinances and Monmouth County Improvement Authority for funding and debt service.

Assisted with day-to-day borough operations, labor, contracts, and borough policies with all department managers.

Administrated recreation / beach/ pool / construction / payroll / time keeping / leave reporting software in 2021 to 2024.

WORK EXPERIENCE:**12/19-2/21****BOROUGH OF BEACH HAVEN; TAX COLLECTOR'S OFFICE,
Tax and Water Utility Collector**

Supervised office staff and the billing, collecting, reporting, and enforcement of borough taxes and water charges.

Calculated municipal, 3rd party tax liens, redemptions, delinquent tax notices, electronic tax sale.

Prepared and deposited all cash, checks, or Municipay payments, balance tax and water receivables.

All other statutory duties as required including 200' radius, NSF collection, OPRA, and tax search officer.

Experience with Vital, Municipay, Edmunds and Sensus software.

1/06-9/18**RAMAPO COLLEGE OF NJ; Business Services, Mahwah, NJ
Senior Financial Analyst / Financial Budget Analyst****3/99-1/06****SUPERIOR COURT OF NEW JERSEY; Bergen Vicinage, Hackensack, NJ
Financial Analyst****8/96-3/99****ERNST & YOUNG, LLP; Lyndhurst, NJ
Accounting Coordinator / Supervisor****2011-2014****KMP GRANT CONSULTING, LLC; Wallington, NJ
Owner**

Coordinated and led the activities of a grant program that supported capital improvement projects for fire department. Prepared grant applications for submittal and other reports as required by granting agencies

Acquired over \$500,000 in FEMA Fire Act funds to replace fire equipment and vehicles

Consulting with fire companies on grant applications and QuickBooks Online

VOLUNTEER**ORGANIZATIONS:**

Current Spring Lake Firefighter 2017-present

Current Spring Lake Fire Co. 1 President for 2021-2023, Secretary 2020

Former Wallington FD Chief (2002-2004) and Firefighter/Treasurer 1994-2015

Former Secretary of Wallington Firemen's Relief Association (2005-2020)

Former Wallington School Board Member (2010-2013), served as Finance Chair

APPENDIX III



August 29, 2025

Honorable Representative Frank Pallone, Jr.
United States House of Representatives
67/69 Church Street
New Brunswick, NJ 08901

Re: The No Surprises Act

Dear Representative Pallone, Jr.,

I am writing in follow-up to a letter sent to your attention by Richard Kunze, Chair of the New Jersey Municipal Reinsurance Health Insurance Fund. As Chair Kunze noted, there are eight Health Insurance Funds (HIF) in New Jersey, and I am the chair of the Central Jersey Health Insurance Fund, which includes municipalities and school districts located in your Congressional District. I appreciate this opportunity to provide additional details regarding issues relating to the No Surprises Act (the Act) and its financial impact on the Central Jersey Health Insurance Fund members in your district.

The Central Jersey Health Insurance Fund is owned and governed by its 39 member organizations, pooling resources to provide choice and value for employees while delivering savings for our member employers. Surpluses belong to members of our fund, not insurance companies, and the combined purchase strength delivers flexible, affordable, and customizable health benefits for employees. A list of our member organizations is provided.

As employer health insurance providers, we pride ourselves on the equitable payment to health care providers who may be out of network (OON). Unfortunately, the Act's Independent Dispute Resolution (IDR) process has resulted in abuse by service providers, as well as unleashing a cottage industry of companies who are using the process to secure unreasonable awards and fees for OON claims. These awards and accompanying fees have no rational basis. They are adversely affecting the financial integrity of our Fund and encouraging OON providers to set unreasonable fees for their services to secure awards that are difficult to justify by any standard measure.

To date, the Central Jersey Health Insurance Fund has received \$4,147,637.79 in unforeseen arbiter awards accompanied by almost \$194,088.00 in arbitration fees, after the provider claims were originally processed. This cannot be sustained and will cause instability and financial harm, and unless addressed, the IDR process will ultimately harm local taxpayers and public employees.

The NSA has succeeded in reducing patient exposure to surprise medical bills, *but at a substantial and rising cost to our local government members*. The current IDR system disproportionately favors providers and leads to awards significantly above market benchmarks. Combined with administrative burdens and legal uncertainty, the system places our Fund members at risk of financial strain and compliance errors.

As the chair of the Central Jersey Health Insurance Fund, I would welcome the opportunity to meet with you at your earliest convenience to discuss remedies our members believe will address the shortfalls of the current IDR process while maintaining patient protection and the integrity of the law.

Sincerely,

Thomas Nolan
Brielle Borough
Chair, the Central Jersey Health Insurance Fund