

www.schoolshif.com

AGENDA & REPORTS

December 1, 2021

2:00 PM

Forsgate Country Club

SCHOOLS HEALTH INSURANCE FUND MEETING: December 1, 2021 2:00 PM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ BY EXECUTIVE DIRECTOR

Call to order

As Chairman of the Schools Health Insurance Fund, I hereby certify that all provisions of the "Open Public Meeting Law", P.L. 1975, Chapter 231 have been met. Notice of this meeting was given to The Burlington County Times and the Courier Post as well as the Administrators of each member School Board. A posting of this meeting notice has been placed on the public bulletin Board of all member school boards

FLAG SALUTE

ROLL CALL OF 2021-2022 BOARD OF TRUSTEES

<u>Officers</u> Joseph Collins, Delsea Regional BOE-Chairman Beth Ann Coleman, Collingswood BOE

<u>Board of Trustees</u> Lisa Giovanelli, Rancocas Valley BOE Michael Colling, Medford Lakes BOE Christopher Lessard, Frankford Twp BOE Evon Digangi, Mt. Holly BOE Nicholas Bice, Burlington Twp BOE Marie Goodwin, Medford Township Public Schools Jason Schmipf, Kingsway Regional School District Helen Haley, Voorhees Township BOE James Sekelsky, Newton BOE

OPEN MINUTES: September 22, 2021 (Appendix I)

PUBLIC COMMENT: For Agenda Items Only

REPORTS:

EXECUTIVE DIRECTOR (PERMA) Monthly ReportPage 4	4
PROGRAM MANAGER- (Conner Strong & Buckelew) Monthly ReportPage 12	12
GUARDIAN NURSES Monthly ReportPage 15	15

TREASURER - (Verrill & Verrill)

October 2021 Voucher List (Confirmation of Payment)Page 16 November 2021 Voucher List (Resolution 25-21)Page 19 Monthly Report September 2021Page 23
ATTORNEY – (J. Kenneth Harris.) Monthly Report
NETWORK & THIRD PARTY ADMINISTRATOR – (Aetna) Monthly ReportPage 26
NETWORK & THIRD PARTY ADMINISTRATOR – (AmeriHealth) Monthly ReportPage 30
NETWORK & THIRD PARTY ADMINISTRATOR - (Horizon) Monthly Report
PRESCRIPTION ADMINISTRATOR - (Express Scripts) Monthly ReportPage 37
DENTAL ADMINISTRATOR - (Delta Dental) Monthly Report
PUBLIC COMMENT
RESOLUTION - EXECUTIVE SESSION FOR CERTAIN SPECIFIED PURPOSES PERSONNEL - CLAIMS - LITIGATION

MEETING ADJOURNED

Schools Health Insurance Fund Executive Director's Report December 1, 2021

FINANCE & CONTRACTS COMMITTEE

PRO FORMA REPORTS

Fast Track Financial Reports – SHIF – as of September 30, 2021 (page 5)

AUDIT AND ACTUARY YEAR-END REPORTS

A copy of the draft Annual Financial Audit for the period ending June 30, 2020 is attached as a separate document. Bowman & Company will present their findings at the meeting to the Board, but is asking the Finance Committee to approve the final audit. The affidavit and resolution will be ratified at the Executive Committee meeting in January

MOTION: Motion to allow the Finance Committee to review and approve the final Audit for State filing by 12/31/2021.

DIVIDEND REVIEW

The Finance Committee reviewed the Fund's surplus position and dividend options and will include a recommendation during the budget introduction in February.

RETAINED DIVIDEND LISTING

As a reminder, many of our members retain a dividend on the Fund books which is available for release upon request of the Fund Commissioner. The listing is on page 9.

OPERATIONS & NOMINATIONS COMMITTEE

NEW MEMBER STATUS

The Fund is at approximately 14% of its 20% growth cap. Although the Fund has seen multiple applications, there are no requests for membership at this time.

SCHOOLS HEALTH INSURANCE FUND FINANCIAL FAST TRACK REPORT

AS OF September 30, 2021

			. ,		
		THIS MONTH	YTD CHANGE	PRIOR YEAR END	FUND BALANCE
1. UNDERWRITING	S INCOME	35,830,586	107,412,818	1,267,419,165	1,374,831,982
2. CLAIM EXPENSES					
Paid Claims		34,175,131	91,945,411	1,009,591,556	1,101,536,967
IBNR		262,060	(333,516)	31,677,000	31,343,484
Less Specifi	c Excess	(548,164)	(548,164)	(14,465,335)	(15,013,499)
Less Aggreg	gate Excess	-	-	-	-
TOTAL CLAIMS		33,889,027	91,063,731	1,026,803,221	1,117,866,952
3. EXPENSES					
MA & HMO	Premiums	15,189	29,859	470,915	500,774
Excess Pren	niums	717,905	2,135,150	37,493,770	39,628,919
Administrati	ive	2,680,642	7,843,021	95,807,230	103,650,251
TOTAL EXPENSE	S	3,413,736	10,008,030	133,771,915	143,779,945
4. UNDERWRITING PI	= ROFIT/(LOSS) (1-2-3)	(1,472,177)	6,341,057	106,844,029	113,185,086
5. INVESTMENT INCO		78,544	251,182	6,435,736	6,686,918
6. DIVIDEND INCOME		0	0	7,505,955	7,505,955
7. STATUTORY PROFI		(1,393,633)	6,592,239	120,785,720	127,377,959
8. DIVIDEND		44,618	44,618	38,894,640	38,939,258
9. TRANSFERRED SURPLUS				28,079,045	28,079,045
10 STATUTORY SURPLUS (7-8)		(1,438,251)	6,547,621	109,970,125	116,517,746
		SURPLUS (DEFIC	ITS) BY FUND YEAR		
Closed	Surplus	(216,995)	(648,022)	100,503,177	99,855,154
	Cash	(176,480)	1,918,861	116,807,277	118,726,138
2020/2021	Surplus	130,408	(1,352,878)	9,466,948	8,114,070
	Cash	(825,433)	(18,849,408)	27,316,927	8,467,518
2021/2022	Surplus	(1,351,664)	8,548,522		8,548,522
	Cash	(1,545,627)	15,849,361		15,849,361
TOTAL SURPLUS (D		(1,438,251)	6,547,621	109,970,125	116,517,746
TOTAL CASH	,	(2,547,540)	(1,081,187)	144,124,203	143,043,017
			IS BY FUND YEAR		
TOTAL CLOSED YE	AR CLAIMS	232,928	799,434	722,037,252	722,836,686
FUND YEAR 2020/2	2021				
Paid Claims		3,280,684	28,310,294	277,786,858	306,097,152
IBNR		(2,847,431)	(26,387,720)	31,677,000	5,289,280
Less Specifi	c Excess	(532,365)	(532,365)	(4,697,889)	(5,230,254
Less Aggreg		0	0	0	0
TOTAL	-	(99,111)	1,390,209	304,765,969	306,156,178
FUND YEAR 2021/2	2022	· · ·			
Paid Claims		30,645,719	62,819,883		62,819,883

COMBINED TOTAL CLAIMS	33,889,027	91,063,731	1,026,803,221	1,117,866,952
TOTAL	33,755,210	88,874,087	0	88,874,087
Less Aggregate Excess	0	0		0
Less Specific Excess	0	0		0
IBNR	3,109,491	26,054,204		26,054,204
Paid Claims	30,645,719	62,819,883		62,819,883

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.

RATIOS				
	FY 2020-21			
INDICES	YEAR END	JUL	AUG	SEP
			·	
Cash Position	\$ 144,124,203	\$ 142,115,684	\$ 145,590,556	 143,043,017
IBNR	\$ 31,677,000	\$ 31,441,599	\$ 31,081,424	\$
Assets	\$ 163,633,320	\$ 169,324,994	\$ 171,782,828	 171,197,371
Liabilities	\$ 53,663,195	\$ 53,598,144	\$ 53,826,832	\$
Surplus	\$ 109,970,125	\$ 115,726,850	\$ 117,955,997	\$ 116,517,746
Claims Paid Month	\$ 28,236,885	\$ 27,642,900	\$ 30,127,380	\$ 34,175,131
Claims Budget Month	\$ 27,204,781	\$ 32,911,260	\$ 32,176,069	\$ 32,888,379
Claims Paid YTD	\$ 294,183,014	\$ 27,642,900	\$ 57,770,280	\$ 91,945,411
Claims Budget YTD	\$ 311,809,085	\$ 32,911,260	\$ 65,087,329	\$ 97,975,708
RATIOS				
Cash Position to Claims Paid	5.1	5.14	4.83	4.19
Claims Paid to Claims Budget Month	1.04	0.84	0.94	1.04
Claims Paid to Claims Budget YTD	0.94	0.84	0.89	0.94
Cash Position to IBNR	4.55	4.52	4.68	4.56
Assets to Liabilities	3.05	3.16	3.19	3.13
Surplus as Months of Claims	4.04	3.52	3.67	3.54
IBNR to Claims Budget Month	1.16	0.96	0.97	0.95

	Schools	Health Insura	ance Fund			
	2020/202	21 Budget Sta	tus Report			
		of September, 30	A			
				YTD	\$ Variance	% Varaiance
Expected Losses	YTD Budgeted	Annual	Latest Filed	Expensed		
Medical Claims	87,425,115	350,528,820	302,890,600	79,911,199	7,513,916	9%
Prescription Claims	9,342,272	37,620,166	32,237,754	7,857,129	1,485,143	16%
Dental Claims	1,208,321	4,876,957	3,751,031	1,105,760	102,561	8%
Subtotal Claims	97,975,708	393,025,943	338,879,385	88,874,087	9,101,621	9%
Rate Stabilization Reserve	0	0	0	0	0	0%
DMO Premiums	19,471	79,189	86,618	29,859	(10,388)	
Reinsurance						
Specific	2,135,265	8,601,373	7,346,345	2,135,150	115	0%
Total Loss Fund	100,130,444	401,706,505	346,312,349	91,039,096	9,091,348	9%
Expenses						
Legal	9,400	37,601	37,601	9,596	(195)	-2%
Treasurer	6,478	25,910	25,910	6,477	0	0%
Administrator	494,903	1,994,112	1,694,833	494,964	(61)	
Program Manager	1,321,608	5,328,423	4,552,710	1,419,225	(97,617)	
Local Entity Risk Management	1,457,542	5,917,377	4,742,157	1,457,578	(36)	
TPA - Med Aetna	1,845,338	7,415,854	6,548,993	1,848,924	(797)	
Program Manager - Guardian Nurses	236,634	953,222	814,137	269,500	(32,866)	
TPA - Med AmeriHealth Admin	470,348	1,912,390	1,439,640	471,355	(1,008)	
TPA - Med Horizon	7,527	27,991	22,440	7,509	18	0%
TPA - Vision	2,790	10,831	10,789	Included above i		070
TPA - Dental	55,027	222,887	171,438	54,974	53	0%
Actuary	7,433	29,733	29,733	7,288	146	2%
Auditor	5,049	20,196	20,196	5,049	0	0%
Subtotal Expenses	5,920,076	23,896,526	20,110,577	6,052,439	(132,363)	
			_ • , • ,_ • .	.,,	(;_;_;;;;)	
Misc/Contingenct Expenses	11,470	45,881	45,881	1,686	9,784	85%
Data Analysis System	30,092	120,369	120,369	30,093	(1)	
Wellness Program	141,470	569,875	486,724	141,513	(43)	
Affordable Care Act Taxes	34,905	140,634	120,144	34,916	(11)	
A4 Retiree Surcharge	1,573,652	6,309,519	5,452,031	1,574,874	(1,222)	
Plan Documents	7,500	30,000	30,000	7,500		0%
Enrollment Audits	0	0	0	0	-	0%
Total Expenses	7,719,166	31,112,804	26,365,726	7,843,021	(123,855)	-2%
Total Budget	107,849,610	432,819,309	372,678,075	98,882,117	8,967,493	8%

Schools Health Insurance Fund CONSOLIDATED BALANCE SHEET AS OF SEPTEMBER 30, 2021

BY FUND YEAR

	SHIF 2021/2022	SHIF 2020/2021	CLOSED YEAR	FUND BALANCE
ASSETS	/			211211.02
Cash & Cash Equivalents	15,849,361	8,467,518	118,726,138	143,043,017
Assesstments Receivable (Prepaid)	18,791,797	14,513	38,326	18,844,636
Interest Receivable	-	-	0	0
Specific Excess Receivable	-	5,193,208	182,867	5,376,074
Aggregate Exœss Reœivable	-	-	-	-
Dividend Reœivable	-	-	-	-
Prepaid Admin Fees	7,288	-	-	7,288
Other Assets	1,728,004	2,198,352	-	3,926,357
Total Assets	36,376,450	15,873,591	118,947,330	171,197,371
LIABILITIES				
Accounts Payable	-	-	-	-
IBNR Reserve	26,054,204	5,289,280	-	31,343,484
A4 Retiree Surcharge	1,574,874	2,418,530	-	3,993,404
Dividends Payable	-	-	-	-
Retained Dividends	-	-	19,092,176	19,092,176
Acrued/Other Liabilities	198,850	51,711	-	250,561
Total Liabilities	27,827,928	7,759,521	19,092,176	54,679,625
EQUITY				
Surplus / (Defiat)	8,548,522	8,114,070	99,855,155	116,517,746
Total Equity	8,548,522	8,114,070	99,855,155	116,517,746
Total Liabilities & Equity	36,376,450	15,873,591	118,947,330	171,197,371
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.

SHIF Member Retained Dividends as of 9/30/2021

Res Contraction of Co	-	ance_0930 🔤
Alexandria Township BOE	S	86,761.31
Alloway Township BOE	S	12,153.17
BELLMAWR PUBLIC SCHOOL DISTRICT	S	156,397.34
Berlin Borough BOE	S	199,879.23
Black Horse Pike Regional BOE BLAIRSTOWN BOE	S	1,700,615.53
Burlington Township BOE	S	39,538.14
Byram Township BOE	S	200,203.30
CHESTERFIELD BOE	S	204,501.5
Cinnaminson Township BOE	S	1,292,902.92
City of Burlington BOE	S	634,627.30
Clayton BOE	S	70,228.38
CLAYTON BOE	S	69,680.75
DELRAN TWNSP PUBLIC SCHOOLS	S	329,046.53
Delsea Regional BOE	S	1,365,418.45
DEPTFORD TOWNSHIP BOE	S	162,069.62
ATONTOWN BOE	S	112,822.5
ERC	S	150,500.25
VESHAM TOWNSHIP BOE	S	
		358,363.20
EWING TOWNSHIP BOE	S	111,211.99
rankford Township BOE REDON TOWNSHIP BOE	S	423,644.90
	S	79.9
RELINGHUYSEN TOWNSHIP BOE	S	10,016.2
Sateway Regional BOE	S	588,670.76
	S	166,975.1
GLEN RIDGE PUBLIC SCHOOLS	S	121,857.6
łainesport Township BOE	S	21,365.5
lardyston Township BOE	S	404,110.66
farrison Township BOE	S	193.62
HIGH POINT REGIONAL BOE	S	211.3
10PE TOWNSHIP SCHOOL DISTRICT	S	11,064.28
AMESBURG BOE	S	55,652.07
EAP ACADEMY UNIVERSITY CHARTER SCHOOL	S	90,837.8
EBANON TOWNSHIP BOE	S	222,589.74
ENAPE VALLEY REGIONAL BOE	S	52,670.7
.ogan Township BOE	S	463,158.83
ower Alloways Creek BOE	S	47,807.24
UMBERTON TOWNSHIP BOE	S	33,268.11
	S	33,699.27
Mantua Township BOE	S	110,816.07
Vedford Lakes BOE	-	262,680.53
Medford Township BOE	S	831,961.21
	S	285.02
VOORESTOWN TOWNSHIP PUBLIC SCHOOLS	S	1,720,875.87
AT. Holly Township BOE	S	580,480.00
IT. LAUREL TOWNSHIP SCHOOLS	S	1,666,726.6
NORTHERN BURLINGTON COUNTY REGIONAL SCHOOL DISTRICT	S	126,614.0
DGDENSBURG BOROUGH SCHOOL DSTRC.	S	73,681.44
Paulsboro BOE	S	19,162.12
AULSBORO PUBLIC SCHOOLS	S	68,060.14
PINELANDS REGIONAL SCHOOL DISTRICT	S	155,805.69
POHATCONG TOWNSHIP BOE	S	4,185.46
Rancocas Valley Regional BOE	S	596,876.12
Riverside Township BOE	S	748,867.5
CHOOL DISTRICT OF THE CHATHAMS	S	313,765.9
Southampton Township BOE	S	335,309.5
PARTA BOE	S	217.3
TILLWATER TOWNSHIP BOE	S	13,240.1
WEDESBORO-WOOLWICH BOE	S	263,787.7
abernacle BOE	S	313,240.6
Ipper Pittsgrove BOE	S	120,312.1
/OORHEES TOWNSHIP BOE	S	127,870.1
VASHINGTON BOROUGH BOE	S	19,992.3
VATCHUNG HILLS REGIONAL HIGH SCHOOL	S	159,702.3
Vest Deptford BOE	S	230,390.3
VHITE TOWNSHIP	S	24,027.7
Voodbury Heights BOE	S	112,692.63
Voodstown-Pilesgrove BOE	S	3,286.10

<u>REGULATORY</u> SCHOOLS HEALTH INSURANCE FUND YEAR: 2021/2022 – As of November 20, 2021

	1/2022 - AS 01 NOVEILDEI 20, 2021
Monthly Items	<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	List of Compliance included below
New Members	Filed
Withdrawals	N/A
Risk Management Plan and By Laws	Filed
Cash Management Plan	Filed
Unaudited Financials	Q2 filed
Annual Audit	June 30, 2020 - 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	To be filed
Benefit Changes	N/A
-	

Indemnity and Trust Agreement Compliance Listing

MEMBER	I&T END DATE
Logan Township BOE	6/30/2021
Woodbury Heights BOE	6/30/2021
Delsea Regional BOE	12/31/2021
Sandyston-Walpack Consolidated School District	12/31/2021
Springfield Township BOE	12/31/2021
West Morris BOE	12/31/2021

** Logan TWP BOE - passed and pending receipt **

School's Health Insurance Fund Program Manager's Report

December 2021 Program Manager: Conner Strong & Buckelew Online Enrollment Training: shif_enrollments@permainc.com Enrollments/Eligibility/Billing: shif_enrollments@permainc.com Brokers: brokerservice@permainc.com

MONTHLY BILLING

As a reminder, please be sure to check your monthly invoice for accuracy. If you find a discrepancy, please report it to the SHIF enrollment team. The Fund's policy is to limit retro corrections, *including terminations*, to 60 days. We have noticed an increase in requests for enrollment changes, billing changes, terminations and additions well past the 60-day period. Moving forward, it is of the utmost importance to review bills for rate and enrollment accuracy on a monthly basis. If there is an error, please bring it to the enrollment team's attention.

BROKER CONTACT INFORMATION

Please direct any escalated claims, benefit coverages, prescription coverage, Medicare advantage or appeal related questions to our dedicated SHIF Client Servicing Team. The team can be reached by email at <u>brokerservice@permainc.com</u>.

AETNA UPDATE Contract Negotiations:

Jefferson Health There continues to be dialogue between Aetna and Jefferson Health. The contract has been extended through January 31, 2022. Aetna remains confident that they will settle as it is an important relationship for both parties

COMPLIANCE AND LEGISLATIVE NOTICES

Garden State Health Plan-Roll Out

The Schools Health Insurance Fund (SHIF) began its roll out of the Garden State Plan (GSP) making it available to membership School Districts for as early as January 1, 2022. As of November 23, 2021 the State Educators Health Benefits Plan (SEHBP)'s solution is unknown.

We have worked with our broker partners to distribute materials and rates for our members to review and make a determination on the implementation of the GSP based at each entity's discretion.

Implementing January 1, 2022:

- SHIF TPAs (Aetna and AmeriHealth) both have a GSP Solution ready for implementation.
 - Aetna will utilize a New Jersey Only version of it's Whole Health Network
 - AmeriHealth will utilize a New Jersey only version of it's Value Network
- Passive Open Enrollment November 29th December 10th
 - Only election allowed is to enroll in the GSP (unless there was a qualified life event)
- Recommended enrollment system update- Close of Business December 13th

- Coverage will be in effect January 1, 2022; ID Cards may be received after the effective date
- Prescription coverage plan and rates are the same as the Educators Health Plan
- Standard Open Enrollment will be held in the spring for July 1.
- Rates presented are good through June 30, 2022.

Deferring Effective Date:

- Will be able to implement at a later date with special open enrollment
 - Can be on, before or after July 1.
- Rates presented are good through June 30, 2022

We will continue to follow the actions of the SEHBP and any additional legislation released on Chapter 44, specifically related to the Garden State Plan.

OPERATIONS UPDATES

Guardian Nurses - Return on Investment

Guardian Nurses has partnered with Windsor Strategy Partners an actuarial agency out of Princeton, New Jersey to develop a return on investment analysis of their current clients.

This project will require an exchange of de-identified claims data with Guardian Nurses who is an approved vendor of the Fund. Please be assured there will be no identifying information (names, date of birth, SS#, etc.) being shared for this analysis.

We look forward to seeing and sharing the results of this study.

No Surprises Act ID Card Impact

Aetna's internal compliance department is reassessing their stance based on to the ID card reissue project. Changes to Aetna ID Cards are on hold pending further review.

AmeriHealth

Will be moving forward with issuing new ID cards for the SHIF population. The updated card will now include information on deductibles, out of pocket maximums. Cards will be released late December for January 1, 2022. ID numbers will not be changing.

AmeriHealth.	Member Name: ##fname_Mi## ##iname_suffix## Member ID #: ##Member-ID##	This card does not guarantee cardholder's eligibility. To verify eligibility and coverage, please contact Customer Service. Customer Service: 1-844-352-1706 Provider Precertification: visit www.AHATPA.com/Providers Fax: 1-215-784-0672 Mental Health/Substance Abuse: 1-800-778-2119 PHCS Travel Network: 1-800-678-7427
PRIMARY CARE \$10 SPECIALIST \$10 URGENT CARE \$10 EMERGENCY ROOM \$25 INPATIENT STAY - 100% PREVENTIVE CARE - 100% SELPFUNDED GROUP	INN OON IND DED: \$200 \$500 FAM DED: \$800 \$1500 IND OOPM: \$200 \$700 FAM OOPM: \$800 \$2100	Claims Address: Payer ID: 54763 Amerihealth Administrators P.O. Box 21545 Eagan, MN 55121 www.myahabenefits.com

Artemis Data Warehouse Reporting

Follow Ups:

- Continue to promote \$0 Copay Telemed Behavioral Health Program
- Aetna and AmeriHealth have received information on the claims of concerns discussed in September and are reviewing their protocols to assure steerage is first to an in network provider.
- Working with Guardian Nurses to develop a list of service and diagnosis codes that the Carriers can implement in to their data reporting in 2022. Our new Carrier contracts include an allotment for technical enhancements that would moderate the cost.

Recommended Upcoming 2022 Reports and Reviews:

Q1 – Inflammatory Conditions – Specifically MSK

- Q2 Women's Health and Gaps in Care
- Q3- Men's Health and Gaps in Care

Q4-TBD

Administrative Authorization:

Date	Appeal Type	Determination
October 2021	Medical Appeal	Denial Upheld



Schools Health Insurance Fund Board Meeting Summary December 1, 2021



Total Referrals		9/3/21 through 11/16/21	9/3/20 through 11/16/20			
Total Referrals		663	675			
Total Referrals (ACUTE)	(includes 179 HSX)	626	573			
Total Referrals (COMPLEX)		37	102			
Hospitalizations						
Total Members Hospitalized		211	165			
Members Requiring ICU Leve	Care	20	10			
Readmissions		16				
Complex Care Member Admi	ssions	2	0			
MobilizationsAcute		215	62			
Inpatient Visits		171	32			
Accompaniments		37	22			
Home Visits		7	8			
MobilizationsComplex	Program	20	18			
Inpatient Visits		0	0			
Accompaniments		17	16			
Home Visits		3	2			
School Districts with Mos	t Referrals	# Cases	# Cases			
Gloucester Twp BOE		35	0			
Lenape Regional High School	BOE (South Jersey)	33	51			
Gloucester County Special Se	rvices School	28	31			
Potential High Claimants	9/3/2021-11/16/2021	Status	Insurer			
High Claimant	Diagnosis					
HC #1 ICU x 3 days	Thoracic aneurysm	Visited inpatient/home	Aetna			
HC #2 ICU x 8 days	Cardiac Surgery	Visited inpatient/homecare/home	AmeriHealth			
HC #3 ICU x 4 days	Stroke	Visited inpatient/home visit/home	AmeriHealth			
HC #4 ICU x 15 days	Subarachnoid Hemorrhage	Visited inpatient/home	Aetna			
HC #5 remains in ICU	Aortic Valve Replacement	Visited inpatient/needs LTACH	Aetna			
HC #6 remains in CHOP ICU	Cancer/palliative care	Visited inpatient	Aetna			
HC #7 Newborn NICU	Cardiac	In Outreach	AmeriHealth			
HC #8 Newborn NICU	Respiratory	In Outreach	Aetna			
HC #9 remains in ICU	Necrotizing Fasciitis	Visited inpatient/dialysis	AmeriHealth			
HC #10 remains in ICU	Hydrocephalus	Visited inpatient Aetna				

Guardian Nurses Healthcare Advocates, Inc. Lighting Your Way Through the Healthcare Maze P.O. Box 224 Flourtown, PA 19031 Main Phone: 888-836-0260 GuardianNurses.com

SCHOOL HEALTH INSURANCE FUND BILLS LIST

Confirmation of Payment

OCTOBER 2021

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

BE IT RESOLVED that the School 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 20-21 CheckNumber	Vendor Name	<u>Comment</u>	InvoiceAmount
003102 003102 003102 003102 003102 003102	PA YFLEX PA YFLEX PA YFLEX PA YFLEX	CHATHAM 10/21 CHATHAM 9/21 MOORESTOWN 9/21 MOORESTOWN 10/21	24.00 24.00 57.00 57.00
003103 003103 003103	RANCOCAS VALLEY REG HSD RANCOCAS VALLEY REG HSD	FITNESS REIM - LAUREN & BROAD ST - 10/21 FITNESS REIM - DONNA AROMONDO - 5/21	162.00 84.16 85.00
003104 003104 003104 003104 003104	WELLNESS COACHES USA WELLNESS COACHES USA WELLNESS COACHES USA WELLNESS COACHES USA	SWEDESBORO WELLNESS 10/21 SWEDESBORO WELLNESS - 9/21 DELRAN WELLNESS 9/21 DELRAN WELLNESS 10/21	169.16 1,970.00 1,970.00 1,667.00 1 ,667.00 7,274.00
003105 003105 003105	RITA GENGARO RITA GENGARO	CANNED PUMPKIN W LEATTY RECIPES 10.18.21 PROTEIN BARS FOR STAFF 10.18.21	1,274.00 155.72 40.67 196.39
003106 003106	VOORHEES TOWNSHIP BOARD OF EDUCATION	DEPOSIT FOR PRASADA PACKAGE 9.29.21	3,325.00 3,325.00
003107 003107	WOODLAND TOWNSHIP BOARD OF EDUCATION	WELLNESS CHAMPION STIPEND 10/21	500.00 500.00

Total Payments FY 20-21 11,626.55

FUND YFAR 21-22 CheckNumber	Vendor Name	Comment	InvoiceAmount
003108 003108	R-HEALTH, INC.	R-HEALTH MEMBERS 10/21	6,245.00 6,245.00
003109 003109 003109	DELTA CARE DMO DELTA CARE DMO	BE004618620 - GLOUCESTER SSSD 10/21 BE004618579 - GLOUCESTER CNTY IOT 10/21	778.28 168.62 946.90
003110 003110 003110 003110 003110 003110 003110 003110	FLAGSHIP DENTAL PLANS FLAGSHIP DENTAL PLANS FLAGSHIP DENTAL PLANS FLAGSHIP DENTAL PLANS FLAGSHIP DENTAL PLANS FLAGSHIP DENTAL PLANS	DMO PREMIUMS 10/21 DMO PREMIUMS 10/21 DMO PREMIUMS 10/21 DMO PREMIUMS 10/21 DMO PREMIUMS 10/21 DMO PREMIUMS 10/21	3,578.56 898.88 1,240.98 1,150.94 3,422.69 1,916.38
003110 003111 003111	FLAGSHIP DENTAL PLANS DELTA DENTAL OF NEW JERSEY INC.	DMO PREMIUMS 10/21 DENTAL TPA 10/21	5,586.97 17,795.40 18,710.64
003112 003112	HORIZON BCBSNJ	MEDICAL TPA 10/21	18,710.64 2,363.00 2,363.00
003113 003113 003113	AETNA LIFE INSURANCE COMPANY AETNA LIFE INSURANCE COMPANY	VISION TPA 10/21 MEDICAL TPA 10/21	888.16 620,301.60 621,189.76
003114 003114	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 10/21	160,541.25 160,541.25
003115 003115 003115	PERMA RISK MANAGEMENT SERVICES PERMA RISK MANAGEMENT SERVICES	POSTAGE 9/21 ADMINISTRATION FEES 10/21	88.01 166,881.42 166,969.43
003116 003116 003116	J. KENNETH HARRIS, ATTY AT LAW J. KENNETH HARRIS, ATTY AT LAW	PLAN DOCUMENT FEE 10/21 ATTORNEY FEES 10/21	2,300.00 3,102.75 5,402.75
003117 003117	VERRILL & VERRILL, LLC	TREASURER FEE 10/21	2,159.16 2,159.16
003118 003118	COURIER POST	ACCT NO. #CHL-092208 - AD - 8.17.21	31.80 31.80

003119 003119 003119 003119 003119 003119 003119	CONNER STRONG & BUCKELEW CONNER STRONG & BUCKELEW CONNER STRONG & BUCKELEW CONNER STRONG & BUCKELEW	RX - PROGRAM MANAGER FEES 10/21 MEDICAL - PROGRAM MANAGER FEES 10/21 BROKER FEES 10/21 DENTAL - PROGRAM MANAGER FEES 10/21 HEALTH CARE REFORM 10/21	54,442.71 369,068.39 496,446.00 16,031.69 6 602.02
003119	CONNER STRONG & BUCKELEW	HEALI H CAKE KEFOKM 10/21	6,603.93 942,592.72
003120 003120 003120	US WELLNESS INC. US WELLNESS INC.	2021-2022 FEES FOR THE YEAR BURLINGTON TWP 9/21	25,200.00 1,500.00 26,700.00
003121 003121 003121	TA VI HEALTH INC. TA VI HEALTH INC.	LUMBERTON BOE 9/21 VOORHEES BOE 9/21	1,775.00 1,775.00
003122 003122	AETNA BEHAVIORAL HEALTH LLC	LEAP ACADEMY 10/21	3,550.00 470.00 470.00
003123 003123 003123	NJ ADVANCE MEDIA NJ ADVANCE MEDIA	ACCT #1000890281 - CON. AWARD - 8.17.21 ACCT #1000890210 - CON. AWARD - 8.17.21	43.50 151.34 194.84
003124 003124	ADVANTA HEALTH SOLUTIONS INC	7/21 ACTIVEFIT+ PROGRAM INC. CREDITS	4,500.00
003124 003124 003124	ADVANTA HEALTH SOLUTIONS INC ADVANTA HEALTH SOLUTIONS INC ADVANTA HEALTH SOLUTIONS INC	10/21 ACTIVEFIT+ MANAGEMENT FEE 9/21 ACTIVEFIT+ MANAGEMENT FEE 8/21 ACTIVEFIT+ PROGRAM INC. CREDITS	1,706.00 1,735.00 4,480.00
003124 003124 003124	ADVANTA HEALTH SOLUTIONS INC ADVANTA HEALTH SOLUTIONS INC ADVANTA HEALTH SOLUTIONS INC	9/21 ACTIVEFIT+ MANAGEMENT FEE 7/21 ACTIVEFIT+ PROGRAM INC. CREDITS 8/21 ACTIVEFIT+ PROGRAM INC. CREDITS	321.20 120.00 240.00
003124	ADVANTA HEALTH SOLUTIONS INC	10/21 ACTIVEFIT+ MANAGEMENT FEE	321.20 13,423.40
003125 003125	CONNER STRONG & BUCKELEW	GUARDIAN NURSES FEE 10/21	84,000.00 84,000.00
003126 003126 003126 003126 003126	A CCESS A CCESS A CCESS	ACCT #962 - ARC. AND STOR 9.30.21 ACCT #962 - ARC. AND STOR 7.31.21 ACCT #962 - ARC. AND STOR 8.31.21	8.97 8.97 8.97
003127			26.91
003127	FOODWERX FT. NICHOLAS CATERERS	SHIF MEETING 9/21	412.64 412.64
003128 003128	MUNICIPAL REINSURANCE HIF	SPECIFIC REINSURANCE 10/21	720,058.08 720,058.08
		Total Payments FY 21-22	2,793,783.68
		TOTAL PAYMENTS ALL FUND YEARS	2,805,410.23

Chairperson

Attest:

Dated: _

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

Treasurer

SCHOOL HEALTH INSURANCE FUND BILLS LIST

Resolution No.			NOVEMBER 2021
	WHEREAS, the Treasurer has cer	tified that funding is available to pay the following bills:	
		ool Health Insurance Fund's Executive Board, hereby sue warrants in payment of the following claims; and	
	FURTHER, that this authorization sh	all be made a permanent part of the records of the Fund.	
FUND YEAR 21-22 CheckNumber	Vendor Name	<u>Comment</u>	InvoiceAmount
003129 003129 003129 003129 003129 003129 003129	CONNER STRONG & BUCKELEW CONNER STRONG & BUCKELEW CONNER STRONG & BUCKELEW CONNER STRONG & BUCKELEW CONNER STRONG & BUCKELEW	RX - PROGRAM MANAGER FEES 11/21 MEDICAL - PROGRAM MANAGER FEES 11/21 BROKER FEES 11/21 DENTAL - PROGRAM MANAGER FEES 11/21 HEALTH CARE REFORM 11/21	54,556.24 368,260.55 496,175.91 15,986.26 6,589.51 941,568.47
		Total Payments FY 2021	941,568.47
		TOTAL PAYMENTS ALL FUND YEARS	941,568.47

Chairperson

Attest:

Dated: ___

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

Treasurer

19

SCHOOL HEALTH INSURANCE FUND SUPPLEMENTAL BILLS LIST

Resolution No. 25-21				NOVEMBER 2021	
	WHEREAS, the Treasurer has certif	fied that	at funding is available to pay the following bills:		
			th Insurance Fund's Executive Board, hereby rants in payment of the following claims; and		
	FURTHER, that this authorization shall	l be ma	ade a permanent part of the records of the Fund.		
FUND YEAR CLOSED CheckNumber	Vendor Name		<u>Comment</u>	<u>InvoiceAmount</u>	
003130 003130	BERLIN BOROUGH SCHOOL DISTRICT		MONICA S & BRIGID B STIPENDS - MAY 2019	3,892.00 3,892.00	
			Total Payments FY CLOSED	3,892.00	
FUND YEAR 20-21 CheckNumber	Vendor Name		<u>Comment</u>	InvoiceAmount	
003131 003131	BROWN & CONNERY LLP		CURRY V BOMBARA & SHIF - 11/21	1,405.66 1,405.66	
003132 003132	SWEDESBORO WOOLWICH BOE		WELL REIM - VISA GIFT CARD - 11/21	80.95 80.95	
003133 003133	RANCOCAS VALLEY REG HSD		STAFF REIM - ALISA THIEDE - 11/21	135.99 135.99	
003134 003134 003134	WELLNESS COACHES USA WELLNESS COACHES USA		SWEDESBORO WELLNESS 11/21 DELRAN WELLNESS 11/21	1,970.00 1,667.00 3,637.00	
003135 003135	RITA GENGARO		WELL REIM - MINDFUL PATH WS - 11/21	800.00 800.00	
003136 003136	JENNIFER MYERS		WELL REIM - APPLES - 11/21	50.00 50.00	
			Total Payments FY 20-21	6,109.60	
<u>FUND YEAR 21-22</u> <u>CheckNumber</u>	Vendor Name		<u>Comment</u>	InvoiceAmount	
003137 003137	R-HEALTH, INC.		R-HEALTH MEMBERS 11/21	6,245.00 6,245.00	
003138 003138 003138	DELTACARE DMO DELTACARE DMO		BE004661376 - GLOUCESTER SSSD 11/21 BE004661333 - GLOUCESTER CNTY IOT 11/21	588.07 168.62 756.69	
003139 003139	DELTA DENTAL OF NEW JERSEY INC.		DENTAL TPA 11/21	18,657.60 18,657.60	
003140 003140	HORIZON BCBSNJ		MEDICAL TPA 11/21	2,258.00 2,258.00	
003141 003141 003141	AETNA LIFE INSURANCE COMPANY AETNA LIFE INSURANCE COMPANY	20	VISION TPA 11/21 MEDICAL TPA 11/21	894.53 620,131.00 621,025.53	
003142 003142	142				

003143 003143 003143	PERMA RISK MANAGEMENT SERVICES PERMA RISK MANAGEMENT SERVICES	POSTAGE 10/21 ADMINISTRATION FEES 11/21	28.96 166,482.48 166,511.44
003144 003144 003144	J. KENNETH HARRIS, ATTY AT LAW J. KENNETH HARRIS, ATTY AT LAW	PLAN DOCUMENT FEE 11/21 ATTORNEY FEES 11/21	713.00 3,102.75 3,815.75
003145 003145	VERRILL & VERRILL, LLC	TREASURER FEE 11/21	2,159.16 2,159.16
003146 003146	MEDICAL EVALUATION SPECIALISTS	MES #1537910 10/21	551.25 551.25
003147 003147	FRANKFORD TOWNSHIP BOE	WELLNESS ACTIVITIES 11/21	2,014.72 2,014.72
003148 003148	AETNA BEHAVIORAL HEALTH LLC	LEAP ACADEMY 11/21	470.00
003149 003149 003149 003149 003149 003149	ADVANTA HEALTH SOLUTIONS INC ADVANTA HEALTH SOLUTIONS INC ADVANTA HEALTH SOLUTIONS INC ADVANTA HEALTH SOLUTIONS INC	9/21 ACTIVEFIT+ PROGRAM INC. CREDITS 11/21 ACTIVEFIT+ MANAGEMENT FEE 11/21 ACTIVEFIT+ MANAGEMENT FEE 9/21 ACTIVEFIT+ PROGRAM INC. CREDITS	470.00 4,880.00 1,706.00 321.20 80.00
003150 003150	CONNER STRONG & BUCKELEW	GUARDIAN NURSE FEE 11/21	6,987.20 87,500.00
003151 003151	ACCESS	ACCT #962 - ARC. AND STOR 10.31.21	87,500.00 69.55
003152 003152	MUNICIPAL REINSURANCE HIF	SPECIFIC REINSURANCE 11/21	69.55 718,482.04 718,482.04
		Total Payments FY 21-22	1,796,688.93
		TOTAL PAYMENTS ALL FUND YEARS	1,806,690.53
	Chairperson		

Attest:

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

Treasurer

RESOLUTION NO. 25-21

SCHOOLS HEALTH INSURANCE FUND APPROVAL OF THE OCTOBER and NOVEMBER 2021 BILLS LIST AND TREASURERS REPORT

WHEREAS, the **Schools Health Insurance Fund** (the "Fund") held a Public Meeting on **December 1, 2021** for the purposes of conducting the official business of the Fund; and

WHEREAS, The Treasurer for the Fund presented bills lists to satisfy outstanding costs incurred for operating the Fund during the months of October and November 2021 for consideration and approval of the Board of Trustees; 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 September for all Fund Years for consideration and approval of the Board of Trustees; and

WHEREAS, a quorum of the Board of Trustees was present thereby conforming with the By-laws of the Fund to conduct official business of the Fund,

NOW THEREFORE BE IT RESOLVED the Board of Trustees of the Fund hereby approves the Bills List for October and November 2021 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 School Board Joint Insurance Funds.

NOW, THEREFORE BE IT FURTHER RESOLVED, the Board of Trustees of the **Fund** hereby approves the Treasurer's 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 School Board Joint Insurance Funds.

SCHOOLS HEALTH INSURANCE FUND

ADOPTED: December 1, 2021

ВҮ:
CHAIRPERSON

ATTEST:______SECRETARY

				SCHOOLS HE	ALTH INSURANC	E FUND							
	SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED												
Current Fund Year:	2021												
Month Ending:	September												
	Medical	Dental	Rx	Dividend Payable	Med.Adv	Reinsurance	abilization (BO	LFC	Admin	TOTAL			
OPEN BALANCE	113,050,892.09	788,710.98	2,048,096.73	19,340,263.32	0.00	4,956,920.72	912,295.05	0.00	4,493,377.34	145,590,556.23			
RECEIPTS													
Assessments	27,414,165.26	381,131.72	2,916,914.89	0.00	0.00	666,027.08	0.00	0.00	2,415,563.91	33,793,802.86			
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
Invest Pymnts	68,371.09	494.51	3,185.15	11,696.63	0.00	3,200.53	551.74	0.00	2,740.98	90,240.63			
Invest Adj	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
Subtotal Invest	68,371.09	494.51	3,185.15	11,696.63	0.00	3,200.53	551.74	0.00	2,740.98	90,240.63			
Other *	131,601.58	0.00	2,094,312.70	0.00	0.00	0.00	0.00	0.00	100,117.00	2,326,031.28			
TOTAL	27,614,137.93	381,626.23	5,014,412.74	11,696.63	0.00	669,227.61	551.74	0.00	2,518,421.89	36,210,074.77			
EXPENSES													
Claims Transfers	33,033,444.34	333,920.22	2,531,140.88	0.00	0.00	0.00	0.00	0.00	0.00	35,898,505.44			
Expenses	4,630.00	15,188.92	0.00	0.00	0.00	717,905.44	0.00	0.00	2,121,384.53	2,859,108.89			
Other *	(11,758,856.92)	816,794.54	5,269,799.20	259,784.19	0.00	107,313.79	912,846.79	0.00	4,392,318.41	0.00			
TOTAL	21,279,217.42	1,165,903.68	7,800,940.08	259,784.19	0.00	825,219.23	912,846.79	0.00	6,513,702.94	38,757,614.33			
END BALANCE	119,385,812.60	4,433.53	(738,430.61)	19,092,175.76	0.00	4,800,929.10	0.00	0.00	498,096.29	143,043,016.67			

		CE	RTIFICATION AND	RECONCILIA	IION OF CLAIMS	PAYMENTS AND	REC O VERIES		
			1	SCHOOLS H	EALTH INSURAN	CEFUND			
Month		September							
Current	Fund Year	2021							
		1.	2.	3.	4.	5.	6.	7.	8.
		Calc. Net	Monthly	Monthly	Calc. Net	TPA Net	Variance	Delinquent	Change
Policy		Paid Thru	Net Paid	Recoveries	Paid Thru	Paid Thru	То Ве	Be Unreconciled	
Year	Coverage	Last Month	September	September	September	September	Reconciled	Variance From	Month
2021	Medical	25,460,080.06	29,520,563.27	0.00	54,980,643.33	0.00	54,980,643.33	25,460,080.06	29,520,563.27
	Dental	600,756.97	317,389.60	0.00	918,146.57	0.00	918,146.57	600,756.97	317,389.60
	Rx	6,108,881.04	2,531,140.88	0.00	8,640,021.92	0.00	8,640,021.92	6,108,881.04	2,531,140.88
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	32,169,718.07	32,369,093.75	0.00	64,538,811.82	0.00	64,538,811.82	32,169,718.07	32,369,093.75

CUMMARY OF CACH AND DUFE						
SUMMARY OF CASH AND INVES	INIENT INSTRUMENTS					
SCHOOLS HEALTH INSURANCE	FUND					
ALL FUND YEARS COMBINED						
CURRENT MONTH	September					
CURRENT FUND YEAR	2021					

	Description:	Republic Bank - General Account	Republic Bank - Expense Account	Republic Bank Investment Account	Ocean First Bank	Wilmington Trust Investment Account	New Jersey Cash Management Investment Account	Parke Bank Investment Account #8626	Parke Bank - Certificate of Deposit #9000618634	William Penn Bank - Money Market Account	Parke Bank – Certificate of Deposit #9000742721
	ID Number:										
	Maturity (Yrs)								44633		44663
	Purchase Yield:	0.75	0.75	0.75	0.25	0.01	0.05	0.80	0.9	0.5	1
	TO TAL for All										
	Accts & instruments										
Opening Cash & Investment Balance	145590556.3	\$ 4,270,696.64	\$ 113.715.13	\$ 117,692,962.61	\$ 38,752.79	\$ 894.64	\$ 88.482.13	\$ 12,131,013.79	\$ 5.000.000.00	\$ 254,038.52	\$ 6,000,000.00
Opening Interest Accrual Balance	0.01		\$ -	\$ -	\$ -	\$ 0.01		\$ -	\$ -	\$ -	\$ -
opening meresenteruur zurunte	0101	¥	•	¥	•	φ 0.01	•	•	Ŷ	•	Ŷ
1 Interest Accrued and/or Interest Cost	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2 Interest Accrued - discounted Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3 (Amortization and/or Interest Cost)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4 Accretion	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5 Interest Paid - Cash Instr.s	\$90,240.64	\$2,050.76	\$449.13	\$71,728.54	\$4.46	\$0.00	\$3.05	\$6,982.49	\$3,821.92	\$104.40	\$5,095.89
6 Interest Paid - Term Instr.s	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7 Realized Gain (Loss)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8 Net Investment Income	\$90,240.65	\$2,050.76	\$449.13	\$71,728.54	\$4.46	\$0.01	\$3.05	\$6,982.49	\$3,821.92	\$104.40	\$5,095.89
9 Deposits - Purchases	\$48,987,860.84	\$41,119,834.14	\$2,859,108.89	\$5,000,000.00	\$0.00	\$0.00	\$0.00	\$8,917.81	\$0.00	\$0.00	\$0.00
10 (Withdrawals - Sales)	-\$51,625,641.03	-\$43,757,614.33	-\$2,859,108.89	-\$5,000,000.00	\$0.00	\$0.00	\$0.00	\$0.00	-\$3,821.92	\$0.00	-\$5,095.89
			ok	ok	ok	ok	ok				
Ending Cash & Investment Balance	\$143,043,016.71	\$1,634,967.21	\$114,164.26	\$117,764,691.15	\$38,757.25	\$894.65	\$88,485.18	\$12,146,914.09	\$5,000,000.00	\$254,142.92	\$6,000,000.00
Ending Interest Accrual Balance	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Plus Outstanding Checks	\$798,361.71	\$0.00	\$798,361.71	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
(Less Deposits in Transit)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Balance per Bank	\$143,841,378.42	\$1,634,967.21	\$912,525.97	\$117,764,691.15	\$38,757.25	\$894.65	\$88,485.18	\$12,146,914.09	\$5,000,000.00	\$254,142.92	\$6,000,000.00



SCHOOLS HEALTH INSURANCE FUND

Monthly Claim Activity Report

December 1, 2021

			etn				
				I D			
	SCHOO	_S HEAL	TH INSU	RANCE FUND			
	MEDICAL CLAIMS			MEDICAL CLAIMS			
	PAID 2020-2021	# OF EES	PER EE	PAID 2021-2022	# OF EES	PI	ER EE
JULY	\$14,230,010	11,287	\$ 1,261	\$18,771,219	14,784	\$	1,270
AUGUST	\$15,900,571	11,067	\$ 1,437	\$ 23,959,789	14,129	\$	1,696
SEPTEMBER	\$18,681,552	11,211	\$ 1,666	\$ 22,312,790	14,558	\$	1,533
OCTOBER	\$16,487,889	11,339	\$ 1,454	\$ 22,038,722	14,518	\$	1,518
NOVEMBER	\$17,288,537	11,343	\$ 1,524				
DECEMBER	\$16,700,894	11,329	\$ 1,474				
JANUARY	\$17,448,884	12,718	\$ 1,372				
FEBRUARY	\$18,244,698	12,802	\$ 1,425				
MARCH	\$17,582,043	12,829	\$ 1,370				
APRIL	\$17,585,584	13,025	\$ 1,350				
MAY	\$18,916,886	13,363	\$ 1,416				
JUNE	\$23,389,400	13,376	\$ 1,749				
TOTALS	\$212,456,950			\$87,082,520			
				2021-2022 Avg.	14,497	\$	1,504
				2020-2021 Avg.	12,141	\$	1,458

Laı	rge Claimant Report (Drilldown) - Claims	s Over \$100000		
Plan Sponsor Customer: Group / Control:	All Schools Health Insurance Fund 7 00141839,00169498,00169659,00737392,0073		Paid Dates: Service Line of	08/01/2021 - 08/31/2021 01/01/2011 - 08/31/2021 All
	Billed Amt	Paid Amt		Diagnosis/Treatment
	\$745,022.96	\$211,835.77		NONTRA UMATIC INTRA CEREBRAL
	\$805,954.41	\$168,619.35		OTHER PULMONARY EMBOLISM WITH ACUTE COR
	\$424,319.18	\$124,384.16		SPINAL STENOSIS, LUMBAR REGION WITHOUT
	\$275,853.66	\$112,436.90		CONGENITAL INSUFFICIENCY OF AORTIC VALVE
	\$231,887.55	\$111,167.72		DIVERTICULITIS OF LARGE INTESTINE WITH
	\$269,981.76	\$101,414.94		DYSPHAGIA, OROPHARYNGEAL PHASE
Total:	\$2,753,019.52	\$829,858.84		

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

\$379,477.14 \$166,056.01 \$6,998,263.84	\$107,806.95 \$100,667.67 \$2,283,220.07	SINGLE LIVEBORN INFANT, DELIVERED BY CESAREAN	
\$379,477.14	\$107,806.95	SINGLE LIVEBORN INFANT, DELIVERED BY CESAREAN	
\$93,072.32	\$112,009.08	AMY OTROPHIC LATERAL SCLEROSIS	
\$153,194.89	\$114,681.29	NEUTROPENIA, UNSPECIFIED	
\$116,947.00	\$116,151.35	ENCOUNTER FOR SURGICAL AFTERCARE FOLLOWING	
	·		
\$543,738.88	\$117,489.13	NONTRA UMATIC INTRA CEREBRAL	
\$382,488.94	\$131,130.19	ENCOUNTER FOR ANTINEOPLASTIC	
\$213,433.88	\$162,467.98	TWIN LIVEBORN INFANT, DELIVERED BY CESAREAN	
\$194,979.52	\$181,893.12	TWIN LIVEBORN INFANT, DELIVERED BY CESAREAN	
\$803,469.00	\$226,216.83	MYELOFIBROSIS	
\$3,818,671.22	\$796,081.55	OTHER SPECIFIED SEPSIS	
Billed Amt	Paid Amt	Diagnosis/Treatment	
00141839,00169498,00169659,00737392,	00737419	Line of Business:	All
_			01/01/2011 - 09/30/2021
			09/01/2021 - 09/30/2021
	Billed Amt \$3,818,671.22 \$803,469.00 \$194,979.52 \$213,433.88 \$382,488.94 \$543,738.88 \$132,735.04 \$116,947.00 \$153,194.89	Billed Amt Paid Amt \$3,818,671.22 \$796,081.55 \$803,469.00 \$226,216.83 \$194,979.52 \$181,893.12 \$213,433.88 \$162,467.98 \$382,488.94 \$131,130.19 \$5543,738.88 \$117,489.13 \$132,735.04 \$116,624.93 \$116,947.00 \$116,51.35 \$153,194.89 \$114,681.29	Schools Health Insurance Fund b0141839,00169498,00169659,00737392,00737419Service Dates: Line of Business: Diagnosis/TreatmentBilled AmtPaid AmtDiagnosis/Treatment\$3,818,671.22\$796,081.55 \$803,469.00OTHER SPECIFIED SEPSIS MYELOFIBROSIS \$194,979.52OTHER SPECIFIED SEPSIS MYELOFIBROSIS TWIN LIVEBORN INFANT, DELIVERED BY CESAREAN\$213,433.88\$162,467.98TWIN LIVEBORN INFANT, DELIVERED BY CESAREAN\$382,488.94\$131,130.19ENCOUNTER FOR ANTINEOPLASTIC\$382,488.94\$131,130.19ENCOUNTER FOR ANTINEOPLASTIC\$132,735.04\$116,624.93 \$116,513.55FEEDING DIFFICULTIES ENCOUNTER FOR SURGICAL AFTERCARE FOLLOWING\$133,194.89\$114,681.29NEUTROPENA, UNSPECIFIED

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

Plan Sponsor Unique ID : Customer: Group / Control:	All Schools Health Insurance Fund 00141839,00169498,00169659,00737392,00	737419		Paid Dates: Service Dates: Line of Business:	10/01/2021 - 10/31/2021 01/01/2011 - 10/31/2021 All
	Billed Amt	Paid Amt	Diagnosis/Treatment		
	\$1,784,426.80	\$387,032.23	OTHER SPECIFIED SEPSIS		
	\$531,317.44	\$371,256.06	OTHER INTERVERTEBRAL DISC DEGENERATION,		
	\$649,671.83	\$353,376.94	PERICARDIAL EFFUSION (NONINFLAMMATORY)		
	\$1,676,470.05	\$197,442.38	COVID-19		
	\$250,620.61	\$126,514.26	CRANIOSYNOSTOSIS		
	\$196,826.38	\$104,971.94	ENCOUNTER FOR AFTERCARE FOLLOWING		
	\$214,038.25	\$102,198.48	BIPOLAR DISORDER, CURRENT EPISODE MANIC		
Subtotal:	\$5,303,371.36	\$1,642,792.29			

♥aetna[™]

Medical Claims Paid Per Employee July 2021 - October 2021 Total Medical Paid per Employee: \$1,504

Network Discounts

Inpatient:	67.3%
Ambulatory:	66.8%
Physician/Other:	60.9%
TOTAL:	64.6%

Provider Network

% Admissions In-Network:	97.1%
% Physician Office:	96.3%

Aetna Book of Business: Admissions 97.8%; Physician 91.8%

Top Facilities Utilized (by total Medical Spend)

- Virtua-West Jersey
- · University of Pennsylvania
- CHOP
- Cooper
- Morristown Medical Center

Schools Health Insurance Fund

11/1/20 through 10/31/21 (Unless otherwise noted)

Claimants Over \$50,000 (January 2021 - October 2021)	Allentown Service Center Performance: Metrics thru Sept. 2021		
Number of Claims Over \$50,000: 517	Customer Service Results		
Claimants per 1000 members: 14.0	1 st Call Resolution:	95.2%	
Avg. Paid per Claimant: \$120,459	Abandonment Rate:	7.4%	
 Percent of Total Paid: 32.3% Aetna BOB- HCC account for an expert of 40.0% of total Medical Cost 	Avg. Speed of Answer:	163.3 sec	
average of 40.0% of total Medical Cost	Claims Performance F	Results	
Teladoc Activity:	Financial Accuracy:	98.2%	
Jan 20221– October 2021	90% processed w/in:	7.3 days	
	95% processed w/in:	23.3 days	
Total Registrations: 897			
Total Online Visits: 1,298	******		
Total Net Claims Savings: \$175,034			
Total Visits w/ Rx: 933	Performance Goa	ls	
Utilization by Age	1 st Call Resolution:	90%	
0-17: 8.2%	Abandonment Rate less that	n: 3.0%	
18-26: 14.1%	Average Speed of Answer:	30 sec	
27-30: 8.3%			
31-45: 40.9%	Financial Accuracy:	99%	
46-55: 16.9%	90% processed w/in:	14 days	
55-65: 10.4%	95% processed w/in:	30 days	
66+: 1.2%			
Mental Health Visits: 362 🛛 🔪 📈			
Dermatology Visits: 75	~		
New	< <u><</u>		

Darhboard



	-	AmeriHealth.			-		
		Schools Hea	Ith Insurance	e Fund			
	Medical Claim 2020-2021	# of EE's 2020-2021	PER EE		Medical Claim 2021-2022	# OF EE'S 2021- 2022	PER EE
JULY	\$2,636,206.12	3104	\$849.29	JULY	\$3,858,683.06	4034	\$956.54
AUGUST	\$4,021,019.01	3093	\$1,300.03	AUGUST	\$5,584,516.80	4025	\$1,387.45
SEPTEMBER	\$3,662,263.71	3130	\$1,170.05	SEPTEMBER	\$6,769,899.69	4142	\$1,634.45
OCTOBER	\$5,400,921.75	3124	\$1,728.84	OCTOBER	\$7,019,506.38	4146	\$1,693.07
NOVEMBER	\$3,676,934.35	3113	\$1,181.15	NOVEMBER			
DECEMBER	\$5,111,087.09	3102	\$1,647.67	DECEMBER			
JANUARY	\$4,450,033.08	3108	\$1,431.79	JANUARY			
FEBRUARY	\$4,149,253.33	3108	\$1,335.02	FEBRUARY			
MARCH	\$4,428,494.29	3099	\$1,429.00	MARCH			
APRIL	\$5,398,104.55	3100	\$1,741.32	APRIL			
MAY	\$4,412,902.85	3091	\$1,427.66	MAY			
JUNE	\$6,340,904.60	3088	\$2,053.40	JUNE			
TOTALS	\$53,688,124.73			TOTAL	\$23,232,605.93		
	AVERAGE	3105	\$1,441.27		AVERAGE	4086.75	\$1,417.88

	Schools HIF
	Paid Claims 7/1/21-6/30/22
AmeriHealth.	
Average payment per member PMPM 7/1/21- 6/30/22	\$535.50
Number of claimants with paid claims over \$50,000 for YTD	63
Total paid on those claimants:	\$6,470,380.25
Top Facilities Utilized based on paid claims:	
VIRTUA WEST JERSEY HEALTH SYSTEM INC, NJ	
HOSPITAL OF THE UNIV OF PENNSYLVANIA, PA	
KENNEDY UNIVERSITY HOSPITAL GAC, NJ	
COOPER UNIVERSITY HOSPITAL, NJ	
CHILDRENS HOSPITAL OF PHILADELPHIA, PA	
MD LIVE UTILIZATION	
Total Registrations 2021 YTD: 7	
Total Online Visits 2020 : 94	
Member Satisfaction YTD: 93%	
Provider Network	
% Inpatient In- Network: 96.3%	
% Professional providers In-Network: 95.2%	
% Outpatient providers In-Network- 93.3%	

Metric	AHA January MTD	AHA February MTD	AHA March MTD	AHA April MTD	AHA MAY MTD	AHA JUNE MYD	AHA JULY MTD	AHA AUGUST MT	AHA SEPT MTD	AHA OCT MTD
1st Call Resolution	83.70%	85.21%	85.62%	83.33%	82.98%	81.26%	80.21%	81.13%	84.53%	84.60%
ASA	124.60	27.06	93.05	47.19	39.84	33.10	28.90	16.59	16.93	16.27
Abandonment Rate	7.40%	1.99%	6.74%	2.97%	2.34%	1.72%	1.71%	0.87%	1.04%	0.85%
Totals	2021 YTD									
Total Inpatient Admissions	151									
Total Inpatient Days	639									
Total ER visits	214									

		PLAN SPONS	OR INFORMATION SERVICES
AmeriHealth.		Large Claimant	Report- Claims Over \$50,000.00
iroup:	Schools Health Insurance Fun	d	Service Dates:
aid Dates:	10/01/2021 -10/31/2021		Line of Business: All
Network Service	ALL		Product Line: All
Claimant	Relationship	Paid Amount	Diagnosis
1	Employee	\$348,236	Diseases Of The Urinary System
2	Dependent	\$310,216	Cardiac And Circulatory Congenital Anomalies
3	Dependent	\$299,193	Liveborn
4	Employee	\$146,122	Complications
5	Dependent	\$109,048	Hereditary And Degenerative Nervous System Conditions
6	Dependent	\$108,218	Hereditary And Degenerative Nervous System Conditions
7	Employee	\$106,577	Cancer Of Lymphatic And Hematopoietic Tissue
8	Dependent	\$95,182	Schizophrenia And Other Psychotic Disorders
9	Employee	\$92,037	Diseases Of Veins And Lymphatics
10	Dependent	\$91,846	Sprains And Strains
11	Subscriber	\$82,232	Diseases Of The Heart
12	Spouse	\$80,333	Diseases Of The Heart
		\$77,476.13	Spondylosis; Intervertebral Disc Disorders; Other Back Problems
13	Spouse		
14	Subscriber	\$65,081.09	
15	Subscriber	\$58,585.56	Secondary Malignancies
16	Dependent	\$56,651.16	Liveborn
17	Spouse	\$55,130.70	Lower Gastrointestinal Disorders
18	Spouse	\$51,253.96	Alcohol-Related Disorders
Total	\$	2,233,417.81	

SCHOOLS HEALTH INSURANCE FUND (SHIF) - 0001396696

Claims Incurred between 3/1/2020 and 11/29/2021 and Paid between 3/1/2020 and 11/29/2021

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

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
<1	63	119	\$66,001.48	\$554.63	\$29.97
1-5	408	939	\$343,095.82	\$365.38	\$28.16
6-18	1318	3156	\$740,534.39	\$234.64	\$18.01
19-25	679	2057	\$785,479.56	\$381.86	\$40.77
26-39	1269	3532	\$863,406.43	\$244.45	\$25.25
40-64	2591	7872	\$2,755,357.38	\$350.02	\$38.50
65+	220	673	\$576,180.06	\$856.14	\$100.17
Unknown	0	0	\$0.00	\$0.00	\$0.00

REL TO INS	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Employee	2642	7968	\$2,097,975.72	\$263.30	\$29.79
Spouse	1386	4070	\$1,794,264.97	\$440.85	\$43.55
Dependent	2371	6310	\$2,237,814.43	\$354.65	\$29.97

GENDER	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Female	3615	10832	\$2,760,221.47	\$254.82	\$27.51
Male	2783	7516	\$3,369,833.65	\$448.35	\$39.21
Undisclosed	0	0	\$0.00	\$0.00	\$0.00

ST CD	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
DE	20	46	\$4,186.12	\$91.00	\$5.95
MA	1	1	\$42.13	\$42.13	\$3.24
MD	3	4	\$255.76	\$63.94	\$4.06
NJ	6228	17929	\$5,989,275.46	\$334.06	\$33.07
NY	1	6	\$486.88	\$81.15	\$16.23
PA	145	362	\$135,808.77	\$375.16	\$31.44

Summary by Service Type - Outpatient and Professional Claims

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

SRVC TP DSC	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Emergency Room	272	392	\$494,275.53	\$1,260.91	\$2.65
Emergency Room With Observation Bed	128	143	\$411,270.58	\$2,876.02	\$2.21
Observation Bed	9	9	\$12,324.72	\$1,369.41	\$0.07
Office Physician Visit	538	636	\$68,800.78	\$108.18	\$0.37
Other Physician Visit	84	96	\$17,873.14	\$186.18	\$0.10
Pathology (Laboratory)	5146	11390	\$1,091,814.31	\$95.86	\$5.86
Retail Clinic	6	6	\$780.00	\$130.00	\$0.00
Telemedicine	293	375	\$42,895.55	\$114.39	\$0.23
Urgent Care	1139	1464	\$239,174.57	\$163.37	\$1.28

Inpatient Cost and Utlization by Age Band

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	ADM CNT	NET PAY	ADM PER 1000	COST PER ADM	COST PMPM	AVG LOS
<1	3	3	3	\$30,384.17	16.80	\$10,128.06	\$13.80	3.33
1-5	1	1	1	\$60,182.83	1.20	\$60,182.83	\$4.94	4.00
6-18	4	4	4	\$96,211.36	1.20	\$24,052.84	\$2.34	3.50
19-25	7	7	7	\$451,322.40	4.80	\$64,474.63	\$23.43	12.29
26-39	15	17	15	\$247,068.09	4.80	\$16,471.21	\$7.23	2.93
40-64	30	30	30	\$1,577,845.34	4.80	\$52,594.84	\$22.05	6.60
65+	7	8	7	\$421,324.08	14.40	\$60,189.15	\$73.25	5.43
Unknown	0	0	0	\$0.00	0.00	\$0.00	\$0.00	0.00

TOP PROVIDERS(TOP 25 BY NET PAYMENT)

PROVIDER NAME	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Virtua West Jersey Health System Inc	1145	2122	\$1,150,177.00	\$542.02	\$6.17
KENNEDY UNIVERSITY HOSPITAL GAC	354	503	\$660,494.92	\$1,313.11	\$3.55
Childrens Hospital of Philadelphia	148	196	\$467,745.09	\$2,386.45	\$2.51
Inspira Medical Center Mullica Hill	525	933	\$464,359.94	\$497.71	\$2.49
Labcorp Raritan	2587	3758	\$354,068.46	\$94.22	\$1.90
Presbyterian Medical Center	64	92	\$342,499.11	\$3,722.82	\$1.84
Virtua-Memorial Hospital of Burlington	35	39	\$284,509.12	\$7,295.11	\$1.53
Thomas Jefferson University Hospital Inc	38	52	\$237,984.14	\$4,576.62	\$1.28
Cooper University Hospital	363	470	\$230,016.78	\$489.40	\$1.23
GENESIS LABORATORY MANAGEMENT	317	398	\$128,411.28	\$322.64	\$0.69
Quest Diagnostics Inc	969	1242	\$115,403.46	\$92.92	\$0.62
Hospital of the Univ of Pennsylvania	24	37	\$110,564.03	\$2,988.22	\$0.59
Alfred I Dupont Institute	14	18	\$95,395.68	\$5,299.76	\$0.51
Virtua Our Lady of Lourdes Hospital	12	13	\$87,667.98	\$6,743.69	\$0.47
Capital Health System	11	12	\$85,610.93	\$7,134.24	\$0.46
TJUH - Methodist Hospital	4	5	\$83,945.97	\$16,789.19	\$0.45
Inspira Medical Center Vineland	141	230	\$82,946.46	\$360.64	\$0.45
PROHEALTH CARE ASSOC LLP	299	391	\$69,112.35	\$176.76	\$0.37
/irtua Gastroenterology	65	178	\$61,849.89	\$347.47	\$0.33
St Christopher's Hospital for Children	3	11	\$47,108.39	\$4,282.58	\$0.25
Capital Health System - Fuld	3	3	\$36,609.41	\$12,203.14	\$0.20
Cape Regional Medical Center	12	13	\$36,598.79	\$2,815.29	\$0.20
Vinute Clinic Diagnostic of New Jersey LLC	1032	1502	\$35,119.15	\$23.38	\$0.19
nspira Health Network Urgent Care PC	119	130	\$32,533.00	\$250.25	\$0.17
EPA of South Jersey	45	52	\$31,987.47	\$615.14	\$0.17

$COVID19\ Vaccine\ Claims\ with\ Procedure\ codes\ 0001A,\ 0002A,\ 0003A,\ 0004A,\ 0011A,\ 0012A,\ 0013A,\ 0031A\ ,\ 91300,\ 91301,\ 91303$

AGE BAND	Single Dose Vaccines CLAIMANT COUNT	1st Dose Vaccine CLAIMANT COUNT	2nd Dose Vaccine CLAIMANT COUNT	NET PAY	COST PER CLAIMANT
<1	0	0	0	\$0.00	
1-5	0	0	0	\$0.00	
6-18	1	239	219	\$30,154.32	\$65.70
19-25	3	132	98	\$15,478.72	\$66.43
26-39	7	369	296	\$44,198.29	\$65.77
40-64	16	916	744	\$110,123.33	\$65.71
65+	3	65	59	\$8,503.26	\$66.95
Unknown	0	0	0	\$0.00	

COVID19 Claims for Urgent Care and Retail Clinics Only

Urgent Care				
AGE BAND	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIMANT
<1	4	4	\$820.23	\$205.06
1-5	68	83	\$14,844.37	\$218.30
6-18	237	305	\$51,206.07	\$216.06
19-25	173	238	\$35,448.03	\$204.90
26-39	234	292	\$48,202.65	\$205.99
40-64	402	503	\$82,866.46	\$206.14
65+	28	39	\$5,786.76	\$206.67
Unknown	0	0	\$0.00	\$0.00

Retail Clinic				
AGE BAND	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIMANT
<1	0	0	\$0.00	\$0.00
1-5	0	0	\$0.00	\$0.00
6-18	0	0	\$0.00	\$0.00
19-25	1	1	\$245.00	\$245.00
26-39	2	2	\$250.00	\$125.00
40-64	3	3	\$285.00	\$95.00
65+	0	0	\$0.00	\$0.00
Unknown	0	0	\$0.00	\$0.00



School Health Insurance Fund

Total Component/Date of Service (Month)	202001	202002	202003	2020Q1	202004	202005	202006	2020Q2	202007	202008	202009	2020Q3	202010	202011	20212	202Q4	2020YTD
Membership	17,015	17,220	17,273	17,169	17,286	17,264	17,251	17,267	18,915	18,770	18,990	18,892	19,733	19,723	19,686	19,714	18,261
Total Days	608,145	576,057	672,439	1,856,641	574,784	554,925	593,491	1,723,200	647,830	643,811	616,526	1,908,167	673,374	649,716	710,378	2,033,468	7,521,476
Total Patients	6,996	6,842	6,832	10,667	5,793	5,749	6,128	9,163	6,784	6,747	6,701	10,568	7,159	6,835	7,038	10,739	15,171
Total Plan Cost	\$2,397,713	\$2,215,759	\$2,700,875	\$7,314,347	\$2,415,964	\$2,256,773	\$2,481,469	\$7,154,206	\$3,038,725	\$2,621,081	\$2,535,444	\$8,195,250	\$2,911,109	\$2,656,192	\$2,886,644	\$8,453,945	\$31,117,748
Generic Fill Rate (GFR) - Total	84.4%	84.6%	83.1%	84.1%	82.9%	83.6%	83.8%	83.4%	83.9%	83.2%	82.2%	83.1%	81.3%	83.5%	83.6%	82.8%	83.3%
Plan Cost PMPM	\$140.92	\$128.67	\$156.36	\$142.00	\$139.76	\$130.72	\$143.84	\$138.11	\$160.65	\$139.64	\$133.51	\$144.60	\$147.52	\$134.67	\$146.63	\$142.94	\$142.01
Total Specialty Plan Cost	\$832,872	\$733,276	\$923,812	\$2,489,961	\$890,943	\$820,499	\$913,971	\$2,625,413	\$1,115,455	\$849,637	\$897,512	\$2,862,604	\$918,749	\$901,580	\$939,776	\$2,760,105	\$10,738,083
Specialty % of Total Specialty Plan Cost	34.7%	33.1%	34.2 %	34.0%	36.9%	36.4%	36.8%	36.7%	36.7%	32.4%	35.4%	34.9%	31.6%	33.9%	32.6%	32.6%	34.5%

Total Component/Date of Service (Month)	202101	202102	202103	2021Q1	202104	202105	202106	2021Q2	202107	202108	202109	2021Q3	202110	202111	202112	2021Q4	2021YTD
Membership	20,984	21,174	21,272	21,143	21,235	21,220	21,263	21,239	23,938	23,930	24,428	24,099	24,440				22,388
Total Days	685,770	648,266	787,671	2,121,707	726,810	779,633	759,695	2,266,138	815,743	873,706	802,681	2,492,130	846,002				7,725,977
Total Patients	7,364	7,331	8,185	11,569	8,137	8,563	8,651	12,553	9,510	9,776	9,493	14,528	10,121				18,714
Total Plan Cost	\$3,000,427	\$2,585,214	\$3,445,088	\$9,030,730	\$3,127,924	\$3,065,825	\$3,204,081	\$9,397,830	\$3,668,083	\$3,721,434	\$3,417,121	#########	\$3,765,389				33,000,587
Generic Fill Rate (GFR) - Total	84.7%	84.8%	82.9%	84.0%	82.1%	81.2%	82.3%	81.9%	84.3%	83.3%	82.8%	83.5%	79.8%				82.7%
Plan Cost PMPM	\$142.99	\$122.09	\$161.95	\$142.37	\$147.30	\$144.48	\$150.69	\$147.49	\$153.23	\$155.51	\$139.89	\$149.48	\$154.07				147.40
% Change Plan Cost PMPM	1.5%	-5.1%	3.6%	0.3%	5.4%	10.5%	4.8%	6.8%	-4.6%	11.4%	4.8%	3.4%	4.4%				3.8%
Total Specialty Plan Cost	\$985,959	\$850,403	\$1,239,991	\$3,076,352	\$952,107	\$948,403	\$1,076,096	\$2,976,606	\$1,125,943	\$1,316,114	\$1,215,469	\$3,657,526	\$1,285,291				\$10,995,775
Specialty % of Total Specialty Plan Cost	32.9%	32.9%	36.0%	34.1%	30.4%	30.9%	33.6%	31.7%	30.7%	35.4%	35.6%	33.8%	34.1%				33.3%

	PMPM
Jan-October 2020	\$142.31
Jan-October 2021	\$147.40
Trend - 2021 YTD	3.6%

APPENDIX I

SCHOOLS HEALTH INSURANCE FUND OPEN MINUTES SEPTEMBER 22, 2021 ZOOM/MORORESTOWN HOUSE 12:00 PM

Meeting of Board of Trustees called to order by Chair Collins Open Public Meetings notice read into record.

Trustee	BOE		
Joseph Collins	Delsea Regional BOE	Chairman	Present
Beth Ann Coleman	Collingswood BOE	Secretary	Absent
Lisa Giovanelli	Rancocas Valley BOE		Present
Michael Colling	Medford Lakes BOE		Present
Christopher Lessard	Frankford Township BOE		Present
Evon Digangi	Mount Holly BOE		Present
Nicholas Bice	Burlington Township BOE		Present
Marie Goodwin	Medford Township BOE		Present
Jason Schimpf	Kingsway Regional School District		Absent
Helen Haley	Voorhees Township BOE		Absent
Jim Sekelsky	Newton BOE		Present

ROLL CALL 2021-2022 BOARD OF TRUSTEES

FUND ADMINISTRATOR: PROGRAM MANAGER:	PERMA Risk Management Emily Koval Paul Laracy Jordyn DeLorenzo Conner Strong & Buckelew Brandon Lodics
FUND ATTORNEY:	Ken Harris
FUND TREASURER:	Lorraine Verrill
FUND ACTUARY:	Abesnt
FUND AUDITOR:	Absent
MEDICAL TPA AMERIHEALTH:	Kristina Strain
MEDICAL TPA AETNA:	Jason Silverstein
MEDICAL TPA HORIZON:	Michelle Witherspoon
EXPRESS SCRIPTS:	Kyle Colalillo
DELTA DENTAL	Absent
GUARDIAN NURSES:	Robin Sambuco

PRESENT FUND PROFESSIONALS:

Ken Verrill Dina Murray Cande Kristoff Nancy DeRiso Ed OMalley Joel Sand Susan Morris Jason Edleman Joe Madera Lisa Sollenberger Tricia Malady John Recchiti Susan Jarnagin Michael Blake Barbara Farquhar Dawn Falzone Joe Ciampa Susan Morris Kim Porter Iim Finn Lynsey Eddy Mary Muscarella Nancy DeRiso Sam Dimarini Steven Jakubowski Laurie Archer Joel Sand **Robert Cloutier Brooke Frapwell** Greg Dorazio Jackie Kane Joseph Colombo Ken Verrill Todd Rietzel

MOTION TO APPROVE OPEN MINUTES OF JULY 28, 2021

Moved:	Trustee Lessard
Second:	Trustee Giovanelli
Vote:	All in Favor

PUBLIC COMMENT - None

EXECUTIVE DIRECTORS REPORT

FINANCIAL FAST TRACK – Executive Director Koval stated that this is the first FFT for the year for the fund and it is starting off positive with earnings of \$2.7 Million in underwriting income. The Statutory surplus is \$180 Million and the claims budget for this month was under budget by about 16%.

MRHIF

Executive Director Koval explained that the MRHIF budget is rising by 6.22% which is a little bit higher than it has been in the past 5 years. Taking into consideration that we are increasing our specific limit \$25,000 starting in July, the funds overall increase is only going up about 3%. Executive Director Koval stated that one thing to note is that the MRHIF made a decision that economically made more sense for them to have a specific limit at the reinsurance level at \$100,000 as opposed to just going up \$25,000. It made more sense for the fund to take on that risk than to pay for it at the reinsurance level.

AUDIT

Executive Director Koval stated that the fund is starting the Annual Audit with Bowman and Company.

CONTRACTS

Executive Director Koval stated Aetna and Amerihealth have been very cooperative in the 2022 administrative fee renewals. Aetna has agreed to a 14% reduction in admin fees. Amerihealth has also negotiated a 7% savings on their administrative fees. This starts on January 1st since this is a statewide contract. Resolution 23-21 is in the Agenda.

MOTION TO APPROVE RESOLUTION 23-21: AWARD OF CONTRACT

Moved:	Trustee Lessard
Second:	Trustee Giovanelli
Vote:	All in Favor

NEW MEMBERS

Executive Director Koval stated there are a few New Members who are interested right now but no commitments.

PROGRAM MANAGER'S REPORT

Program Manage Lodics reviewed the highlights in the Annual Hi-Fund report that was attached with the Agenda.

JEFFERSON HEALTH & AETNA

PM Lodics explained The Aetna contract with Jefferson Health extended through November 1, 2021. The Program Managers Office will keep everyone updated on the status of the contract.

LIFELINE MEDICAL ASSOCIATES

Program Manage Lodics explained that Lifeline Medical Associates is a large OBGYN practice with locations in North Jersey. Aetna and Lifeline were able to settle the contract on September 13, but member disruption letters were mailed. Member retraction letters mailed to impacted membership to advise of the contract renewal. 960 members in the SHIF identified as having used this provider group within the last 12 months.

COVID 19

Mr. Lodics stated that New Jersey requires workers in key industries including healthcare, education, and public service to be vaccinated or undergo regular COVID-19 testing. Mr. Lodics explained that Covid-19 testing as a condition of employment or testing deemed "surveillance" are not covered by insurance. The Schools Health Insurance Fund will continue to cover COVID-19 testing when deemed medically necessary by a healthcare professional, in accordance with CDC guidelines.

GARDEN STATE HEALH PLAN

Program Manager Lodics stated that the PM's office is currently working with the Actuary to price this plan out as well as working with Aetna and Amerihealth. The legislation right now requires that the

plan has to be offered January 1 2022. They will be expecting to have a better timeframe in November and will send out a communication piece.

NO SURPRISES ACT ID CARDS

Mr. Lodics explained that Aetna's internal compliance department is reassessing their stance based on to the ID card reissue project. Changes to Aetna ID Cards are on hold pending further review. As for Amerihealth, they will be moving forward with issuing new ID cards for SHIF population.

TELEMEDICINE

As a reminder, effective September 1st Aetna's TelaDoc and AmeriHealth's MD live now include \$0 mental and behavioral health services for all SHIF members.

ARTEMIS DATA WAREHOUSE REPORTING

Program Manage Lodics reviewed the Artemis Reporting that was included in the agenda.

GUARDIAN NURSES - Ms. Sambuco reviewed the guardian nurse reporting from July through September 2nd. Guardian Nurses are able to get into the ICU to see patients and they are not having any issues with getting into hospitals to see patients. With an acceptation to COVID-19 patients, they are asking to meet with a family member instead of the patient.

TREASURER - Fund Treasurer reviewed the bills list and treasurers report.

CONFIRMATION OF PAYMENT – August 2021	
FUND YEAR	AMOUNT
FUND YEAR 2021/2022	\$2,645,160.33
TOTAL ALL FUND YEARS	\$2,797,447.70

RESOLUTION 24-21 - September 2021 BILLS LIST

FUND YEAR	AMOUNT
FUND 2021-2022	\$2,854,955.35
TOTAL ALL FUND YEARS	\$2,859,108.89

MOTION TO APPROVE RESOLUTION 24-21: AUGUST AND SEPTEMBER BILLS LIST

Moved:	Trustee Giovanelli
Second:	Trustee Lessard
Vote:	All in Favor
ating conding of	ditional nation in records to the 100 days noted in the CMD

Trustee Sekelsky suggesting sending additional notice in regards to the 120 days noted in the CMP.

FUND ATTORNEY - Fund Attorney Ken Harris explained the vaccination requirement for schools. In terms of testing, the rapid test is not an acceptable option. He stated that the

AETNA – Mr. Silverstein reviewed the claims for June 2021, the pepm was \$1,749. The claims for July 2021, the pepm was \$1,270. He said there were 10 claimants over \$100,000 for June and 8 for July. He reviewed the dashboard and noted that all metrics are performing well but there are a few below target. Mr. Silver stein reviewed the COVID-19 reporting included in the agenda.

AMERIHEALTH – Ms. Strain reviewed the claim for August 2021, the pepm was \$1,387.45. She said there were 9 claimants over \$50,000 for the month of August. Mrs. Strain reviewed the COVID-19 reporting included in the agenda.

HORIZON- None.

EXPRESS SCRIPTS – Mr. Colalillo stated that the trend for July 2020 – June 2021 has an increase of 1.5%. This is a normal trend. There were no major high claimants to report. He stated that they will continue to monitor the COVID booster shot and new updates as they come in.

DELTA - None

OLD BUSINESS - None

NEW BUSINESS - None

PUBLIC COMMENT: None

MOTION TO ADJOURN:

MOTION:	Trustee Giovanelli
SECOND:	Trustee Lessard
VOTE:	Unanimous

MEETING ADJOURNED: 1:00 pm

NEXT MEETING: December 1, 2021 Forsgate Counrty Club 2:00pm

Jordyn DeLorenzo, Assisting Secretary Date Prepared: November 11, 2021