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AGENDA & REPORTS

FEBRUARY 23, 2022

12:00 PM

Moorestown Community House

SCHOOLS HEALTH INSURANCE FUND
MEETING: FEBRUARY 23, 2022
12:00 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

Officers

Joseph Collins, Delsea Regional BOE-Chairman
Beth Ann Coleman, Collingswood BOE

Board of Trustees

Lisa Giovannelli, 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 Schimpf, Kingsway Regional School District
Helen Haley, Voorhees Township BOE
James Sekelsky, Newton BOE

OPEN MINUTES: DECEMBER 1, 2021 (Appendix I)

PUBLIC COMMENT: For Agenda Items Only

MOTION: *Motion to open the meeting to the public for agenda items only*

REPORTS:

EXECUTIVE DIRECTOR (PERMA)

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PROGRAM MANAGER- (Conner Strong & Buckelew)

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GUARDIAN NURSES

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TREASURER – (Verrill & Verrill)

December 2021 Voucher List (Confirmation of Payment)Page 28

January 2022 Voucher List (Resolution 6-22)

Monthly Report January 2022.....Page 34

ATTORNEY – (J. Kenneth Harris.)

Monthly Report

NETWORK & THIRD PARTY ADMINISTRATOR – (Aetna)

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NETWORK & THIRD PARTY ADMINISTRATOR – (AmeriHealth)

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NETWORK & THIRD PARTY ADMINISTRATOR – (Horizon)

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PRESCRIPTION ADMINISTRATOR – (Express Scripts)

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DENTAL ADMINISTRATOR – (Delta Dental)

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RESOLUTIONS

PUBLIC COMMENT

RESOLUTION - EXECUTIVE SESSION FOR CERTAIN SPECIFIED PURPOSES

PERSONNEL - CLAIMS - LITIGATION

MEETING ADJOURNED

**Schools Health Insurance Fund
Executive Director's Report
February 23, 2022**

FINANCE & CONTRACTS

PRO FORMA REPORTS

- **Fast Track Financial Reports** – SHIF – as of December 31, 2021 (page 10)

AETNA CLAIMS PROCESSING SLOW DOWN

During the SHIF Budget development process the Fund Actuary discovered that Aetna's claim turnaround time is slower than what the Fund had experienced historically but still within industry standards and within the commitments of their contractual performance guarantees.

Key Items:

- **Financial Reporting:**
 - The Fund's Financial Fast Track represents the paid claims at any given month and include the accrual of an assumed liability for Incurred but Not Reported Claims (IBNR).
 - IBNR is developed by the Fund and certified by independent workup by Actuary utilizing each Carrier's historical performance.
 - IBNR for 7/1/2021-12/31/2021 has been understated
 - The December 2021 Fast Track includes a corrective accrual
- **Aetna Performance Guarantees**
 - As part of their contract, Aetna has financial risk associated with claim turnaround times.
 - 90% of Claims Must Be Processed within 14 days of receipt (2% of Administrative Fees)
 - 95% of Claims Must Be Processed within 30 days of receipt (2% of Administrative Fees)
 - Aetna's self-reported metrics as of December 31st:
 - 90% of claims are being processed in the first 11.8 days
 - 95% of claims are being processed in the first 23.9 days
- **Aetna's Corrective Actions:**
 - Staffing Shortage
 - Increased referral bonus
 - Addition of a retention bonus
 - Increased wages for new and tenured employees
 - Turnaround Time Recovery
 - Reallocation of resources – 3 claims processors have been moved to the HIFs

- Overtime commitment by 2 processors
- Reporting
 - Aetna will provide the HIFs with monthly turnaround time reports, starting at the end of February
- ETA
 - Aetna cannot commit to a timeframe but will continue to push to return to a speed more in line with what the Funds are used to by the beginning of the next Fund Year, 7/1/2022.
- **Additional Reporting Recommendation:**
 - Current:
 - IBNR is included in budget projection with data through December 31.
 - Actuary develops independent IBNR certification with data through June 30 going into New Fund Year.
 - Recommendation:
 - Add Actuary IBNR quarterly review
 - Actuarial Solutions, the Fund's Actuary has presented the attached proposal for the 2 additional IBNR reviews:
 - \$3,000 per review = \$6,000

MOTION: *Motion to expand the 2021-2024 Actuarial Solutions contract scope of services to include additional IBNR review services at an annual amount not to exceed \$6,000*

BUDGET INTRODUCTION

Included below is the 2022-2023 draft budget presentation that has been reviewed by the Finance Committee and is being recommended for introduction.

Claim Funds

Using the analysis provided John Vataha of Actuarial Solutions, the following changes in the claims budget are projected:

- Medical: +5.65%
- Rx: -15.72%
- Dental: -0.78%

In total, these changes, along with reinsurance and expense adjustments, result in the average assessment increase of 3.28%.

The medical increase is within industry trend ranges (~5% to ~9%). The Aetna medical renewal includes an increase to the IBNR estimate, as previously discussed.

The Rx change is significantly below industry trend (~10%) and is attributed to the deeper discounts and enhanced rebates associated with the entrance into the Express Scripts Level Care coalition. The budgeted amount assumes that formulary rebates will equal 30% of claim spend. This compares to an offset of 24% in the 2020/2021 budget.

The dental outcome is also below industry trend (~3%).

Rate Stabilization Reserve

Up to 2.5% of assessments can be budgeted for rate stabilization. The SHIF considers this line item in tandem with the review of surplus retention and dividend policy. Given the SHIF's strong surplus, a rate stabilization reserve has not been included in this draft budget.

MRHIF/Reinsurance

The Fund obtains reinsurance through the Reinsurance Health Insurance Fund. The SHIF currently takes responsibility for specific claims below \$475,000, the Reinsurance HIF assumes claims from \$475,001 to \$900,000, and claims above \$900,000 cede to the reinsurance market.

The budget is prepared with an increase in retention on specific claims by SHIF to \$500,000 at a moderate increase of 3%.

Fully Insured Plans - DMO

A 5% increase has been included for members with the fully insured DMO product.

Expenses

- **Operating Expenses:** The category includes the cost of operating the Fund, items such as the administrator, attorney, treasurer, program manager, auditor, advertising and meeting costs, etc. Operating expenses represents 1.74% of the budget. Professional and operating expenses are based on contracts awarded through the Fund's RFP process.
- **Claims Agents:** As a result of negotiations, our primary medical TPAs, Aetna and AmeriHealth both agreed to a generous reduction in fees. Dental, and vision administration expenses remain flat. Horizon has requested their first increase since joining the Fund, of +2%.
- **Local Brokerage or Risk Manager Fees:** The Fund implements broker fees that are determined by local units. A 2% increase is budgeted for purposes of budget development, but other increases are implemented at the request of specific risk managers. If an entity determines that the fee should be higher or lower, PERMA will adjust rates accordingly.
- **Taxes:** The "Affordable Care Act" tax on the HIF is the Patient-Centered Outcomes Research Fee (the "Comparative Effectiveness Fee"). The New Jersey A4 Retiree Surcharge is budgeted at 1.8% of medical claims using the latest factor published by the Division of Taxation.
- **Wellness:** The wellness line item is included to fund grants to BOEs. The funding level is unchanged on a per-employee, per-month basis.
- **Guardian Nurses:** As approved by an RFP in the spring, an additional nurse advocate was added to the SHIF Guardian Nurses team. The expense continues to be offset through the removal of Case Management and Disease Management services from our Claims Administrators.

ASSESSMENTS

Assessments are inclusive of the Loss Ratio adjustment that the Fund has included in all prior budgets. This adjustment ranges from -2.5% to +2.5% and is only applied after a member has been in the Fund for 3+ years.

Increase Factors by Vendor

Aetna: +5.8%
AmeriHealth: +5.8%
Horizon: +5.8%
Express Scripts: -15%
Delta Dental: Flat
Vision: +5.8%

Assessment Range: -1.2% to 8.46%

Average Increase: 3.28%.

Medical only member average increase: 5.11%

Medical and Rx average increase: 1.16%

DIVIDEND OPTIONS

The Finance Committee reviewed the below dividend availability and are recommending the release of a \$2.7M dividend of surplus in the closed Fund account available to groups who were participants of the Fund as of 6/30/2020.

Schools Health Insurance Fund			
Surplus Objective			
1. Annual Claims Budget	\$	407,680,431	
2. Trended for Growth @ 20%	\$	489,216,517	
3. Surplus Target @ 2.5 Months of Claims	\$	101,920,108	
4. Surplus as of 12/31/2021	\$	110,157,141	
Available for Dividend	\$	8,237,033	
Dividend Illustrated at 1/3 of Available	\$	2,745,678	
History of Surplus and Dividends Since Formation			
	Surplus	Dividend	Dividend as % of Surplus
2016 - 2017	\$ 35,699,535	\$ 661,580	1.85%
2017 - 2018	\$ 44,952,292	\$ 4,934,411	10.98%
2018 - 2019	\$ 75,246,310	\$ 6,222,844	8.27%
2019 - 2020	\$ 105,902,193	\$ 17,196,879	16.24%
2020 - 2021	\$ 109,970,125	\$ 9,878,926	8.98%
Illustration 1/3 of Available	\$ 110,157,141	\$ 2,745,678	2.49%

Surplus Availability is derived by:

Closed Year Surplus + Open Year Surplus - Fund Retention - Growth Trend = Available Surplus for Dividend Release

1. Closed Year Earned Surplus –audited excess income from the members from inception through June 30, 2020. Majority of liabilities have run out from this account
2. Open Year Surplus – excess income from July 2020- Present that still contains claim liabilities and accrued expenses. Current year has been unaudited
3. Growth Trend – An additional 20% (Fund growth cap) of claims for new membership
4. Fund Retention Target – the Fund’s claim retention target is 2.5 months of claims from current Annual Claims Budget

Payment of Dividend:

Although the dividend availability is calculated based on current surplus standing, it is paid out of the closed fund account. The closed fund account is unencumbered surplus. Any surplus achieved in the open years by groups who joined after 6/30/2020, is not impacted by the declaration of the dividend. Their proportionate share is held for future dividend opportunities.

Member retained dividends from prior dividends through 12/31/2021 is included for illustrative purposes and is available for release at any time.

MOTION: *Motion to approve Resolution 3-22 approving a dividend in the amount of \$2,745,678*

AUDIT AND ACTUARY YEAR-END REPORTS

The Fund Auditor presented the final audit to the Finance Committee mid-December which showed no recommendations or findings. The Committee approved, contingent upon the resolution and the fully executed affidavit included in this agenda. The audit was filed with the State on time.

MOTION: *Motion to approve Resolution 1-22 approving the final 2019-2021 Fund Year Audit as per the recommendation of the Finance Committee.*

OPERATIONS & NOMINATIONS

MUNICIPAL REINSURANCE HEALTH INSURANCE FUND

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

The Schools Health Insurance Fund must renew its 3 year membership with the MRHIF via an Indemnity and Trust Agreement. Resolution 5-22 is included in the agenda.

In addition, the MRHIF has an even number of members. Every year there is a 3rd Special Commissioner that is appointed to the MRHIF which rotates Funds in alphabetical order. The SHIF should appoint a 3rd Commissioner for the Calendar year of 2022. Resolution 4-22 appoints this individual.

MOTION: Motion to approve Resolution 5-22 adopting the Indemnity and Trust Agreement with the Municipal Reinsurance Health Insurance Fund effective January 1, 2022.

MOTION: Motion to approve Resolution 4-22 appointing a Special Commissioner to the MRHIF for the MRHIF Fund Year 2022.

EXPRESS SCRIPTS SECURITY BREACH

As was released to the Commissioners in early December, Express Scripts has provided an impact list for the impacted membership and the Schools HIF had 12 member who were potentially impacted by a security breach. Those individuals were notified.

2022 MEL/MRHIF EDUCATIONAL SEMINAR

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

CLAIMS & WELLNESS

SMALL CLAIMS ENROLLMENT EXCEPTIONS

The Small Claims Committee reviewed enrollment exceptions past 60 days. Below are the results:

Description	Request	Result
Newborn	Add past 60 days	Deny
Dental Enrollment	Add dental benefits past 60 days	Deny
Spouse Enrollment	Add spouse due to marriage past 60 days	Deny
Full Time Student	Add past 60 days	Approve

The Committee is encouraging all members to take enrollment system webinars that are offered by PERMA as reminders of Qualifying Life Events.

SCHOOLS HEALTH INSURANCE FUND

FINANCIAL FAST TRACK REPORT

AS OF December 31, 2021

	THIS MONTH	YTD CHANGE	PRIOR YEAR END	FUND BALANCE
1. UNDERWRITING INCOME	36,175,948	216,442,082	1,267,419,165	1,483,861,247
2. CLAIM EXPENSES				
Paid Claims	36,161,894	189,501,822	1,009,591,556	1,199,093,378
IBNR	9,342,264	9,107,198	31,677,000	40,784,198
Less Specific Excess	(1,219,752)	(1,767,916)	(14,465,335)	(16,233,251)
Less Aggregate Excess	-	-	-	-
TOTAL CLAIMS	44,284,407	196,841,105	1,026,803,221	1,223,644,326
3. EXPENSES				
MA & HMO Premiums	2,901	52,259	470,915	523,174
Excess Premiums	717,598	4,291,288	37,493,770	41,785,057
Administrative	2,474,378	15,532,479	95,807,230	111,339,710
TOTAL EXPENSES	3,194,877	19,876,026	133,771,915	153,647,941
4. UNDERWRITING PROFIT/(LOSS) (1-2-3)	(11,303,336)	(275,049)	106,844,029	106,568,980
5. INVESTMENT INCOME	87,893	506,682	6,435,736	6,942,418
6. DIVIDEND INCOME	0	0	7,505,955	7,505,955
7. STATUTORY PROFIT/(LOSS) (4+5+6)	(11,215,443)	231,633	120,785,720	121,017,353
8. DIVIDEND	0	44,618	38,894,640	38,939,258
9. TRANSFERRED SURPLUS			28,079,045	28,079,045
10. STATUTORY SURPLUS (7-8)	(11,215,443)	187,016	109,970,125	110,157,141

SURPLUS (DEFICITS) BY FUND YEAR

Closed	Surplus	(108,219)	(943,672)	100,503,177	99,559,505
	Cash	(135,631)	1,525,579	116,807,277	118,332,855
2020/2021	Surplus	322,046	(1,326,964)	9,466,948	8,139,984
	Cash	568,633	(20,755,364)	27,316,927	6,561,563
2021/2022	Surplus	(11,429,270)	2,457,651		2,457,651
	Cash	659,414	32,462,304		32,462,304
TOTAL SURPLUS (DEFICITS)		(11,215,443)	187,016	109,970,125	110,157,140
TOTAL CASH		1,092,417	13,232,519	144,124,203	157,356,722

CLAIM ANALYSIS BY FUND YEAR

TOTAL CLOSED YEAR CLAIMS	169,184	1,281,254	722,037,252	723,318,506
FUND YEAR 2020/2021				
Paid Claims	1,629,906	32,440,145	277,786,858	310,227,003
IBNR	(740,622)	(29,330,991)	31,677,000	2,346,009
Less Specific Excess	(1,207,456)	(1,739,821)	(4,697,889)	(6,437,710)
Less Aggregate Excess	0	0	0	0
TOTAL	(318,172)	1,369,333	304,765,969	306,135,302
FUND YEAR 2021/2022				
Paid Claims	34,350,509	155,752,329		155,752,329
IBNR	10,082,886	38,438,189		38,438,189
Less Specific Excess	0	0		0
Less Aggregate Excess	0	0		0
TOTAL	44,433,395	194,190,518	0	194,190,518
COMBINED TOTAL CLAIMS	44,284,407	196,841,105	1,026,803,221	1,223,644,326

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.

Schools Health Insurance Fund
CONSOLIDATED BALANCE SHEET
AS OF DECEMBER 31, 2021
BY FUND YEAR

	SHIF 2021/2022	SHIF 2020/2021	CLOSED YEAR	FUND BALANCE
ASSETS				
Cash & Cash Equivalents	32,462,304	6,561,563	118,332,855	157,356,722
Assessments Receivable (Prepaid)	8,450,252	(27,415)	-	8,422,837
Interest Receivable	-	-	0	0
Specific Excess Receivable	-	6,400,664	195,162	6,595,826
Aggregate Excess Receivable	-	-	-	-
Dividend Receivable	-	-	-	-
Prepaid Admin Fees	-	-	-	-
Other Assets	3,474,595	0	-	3,474,595
Total Assets	44,387,151	12,934,812	118,528,018	175,849,981
LIABILITIES				
Accounts Payable	-	-	-	-
IBNR Reserve	38,438,189	2,346,009	-	40,784,198
A4 Retiree Surcharge	3,156,633	2,418,530	-	5,575,163
Dividends Payable	-	-	159,683	159,683
Retained Dividends	-	-	18,808,829	18,808,829
Accrued/Other Liabilities	334,678	30,288	-	364,966
Total Liabilities	41,929,500	4,794,827	18,968,512	65,692,840
EQUITY				
Surplus / (Deficit)	2,457,651	8,139,984	99,559,505	110,157,141
Total Equity	2,457,651	8,139,984	99,559,505	110,157,141
Total Liabilities & Equity	44,387,151	12,934,812	118,528,018	175,849,981
BALANCE	-	-	-	-

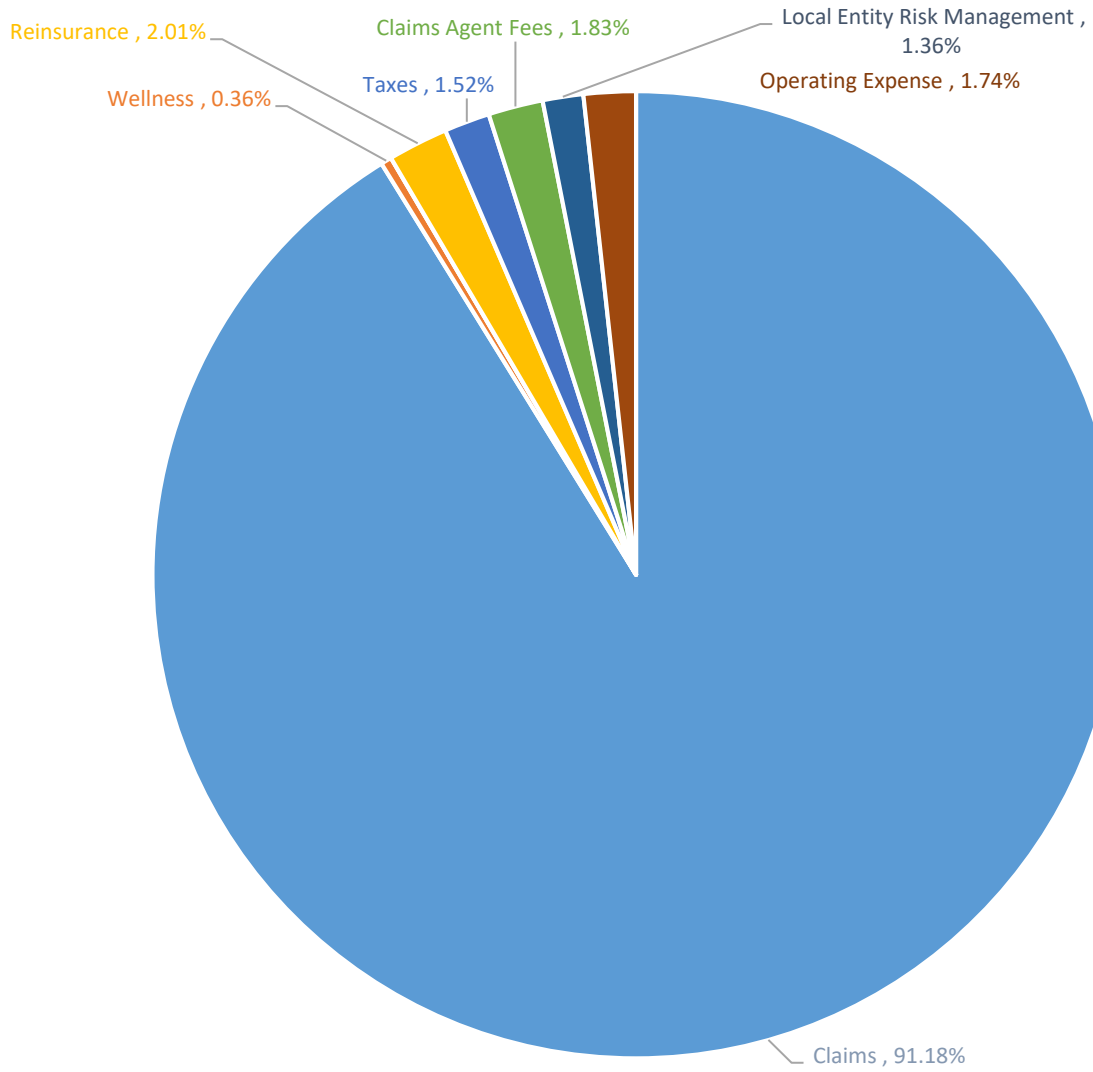
This report is based upon information which has not been audited nor certified
by an actuary and as such may not truly represent the condition of the fund.
Fund Year allocation of claims have been estimated.

SCHOOLS HEALTH INSURANCE FUND							
RATIOS							
	FY 2020-21	2021-2022					
INDICES	YEAR END	JUL	AUG	SEP	OCT	NOV	DEC
Cash Position	\$ 144,124,203	\$ 142,115,684	\$ 145,590,556	\$ 143,043,017	\$ 149,232,883	\$ 156,264,306	\$ 157,356,722
IBNR	\$ 31,677,000	\$ 31,441,599	\$ 31,081,424	\$ 31,343,484	\$ 31,372,818	\$ 31,441,934	\$ 40,784,198
Assets	\$ 163,633,320	\$ 169,324,994	\$ 171,782,828	\$ 171,197,371	\$ 172,074,983	\$ 177,169,193	\$ 175,849,981
Liabilities	\$ 53,663,195	\$ 53,598,144	\$ 53,826,832	\$ 54,679,625	\$ 55,156,800	\$ 55,796,610	\$ 65,692,840
Surplus	\$ 109,970,125	\$ 115,726,850	\$ 117,955,997	\$ 116,517,746	\$ 116,918,183	\$ 121,372,584	\$ 110,157,141
Claims Paid -- Month	\$ 28,236,885	\$ 27,642,900	\$ 30,127,380	\$ 34,175,131	\$ 33,009,496	\$ 28,385,021	\$ 36,161,894
Claims Budget -- Month	\$ 27,204,781	\$ 32,937,435	\$ 32,198,082	\$ 32,884,135	\$ 32,794,461	\$ 32,876,845	\$ 32,859,749
Claims Paid -- YTD	\$ 294,183,014	\$ 27,642,900	\$ 57,770,280	\$ 91,945,411	\$ 124,954,907	\$ 153,339,928	\$ 189,501,822
Claims Budget -- YTD	\$ 311,809,085	\$ 32,937,435	\$ 65,135,517	\$ 98,019,652	\$ 130,814,113	\$ 163,690,958	\$ 196,550,707
RATIOS							
Cash Position to Claims Paid	5.1	5.14	4.83	4.19	4.52	5.51	4.35
Claims Paid to Claims Budget -- Month	1.04	0.84	0.94	1.04	1.01	0.86	1.10
Claims Paid to Claims Budget -- YTD	0.94	0.84	0.89	0.94	0.96	0.94	0.96
Cash Position to IBNR	4.55	4.52	4.68	4.56	4.76	4.97	3.86
Assets to Liabilities	3.05	3.16	3.19	3.13	3.12	3.18	2.68
Surplus as Months of Claims	4.04	3.51	3.66	3.54	3.57	3.69	3.35
IBNR to Claims Budget -- Month	1.16	0.95	0.97	0.95	0.96	0.96	1.24

Schools Health Insurance Fund						
2020/2021 Budget Status Report						
as of December 31, 2021						
				YTD	\$ Variance	% Variance
Expected Losses	YTD Budgeted	Annual	Latest Filed	Expensed		
Medical Claims	175,342,478	350,718,212	302,890,600	173,082,960	2,259,518	1%
Prescription Claims	18,779,537	37,573,162	32,237,754	18,941,391	(161,854)	-1%
Dental Claims	2,428,692	4,853,808	3,751,031	2,166,167	262,525	11%
Subtotal Claims	196,550,707	393,145,182	338,879,385	194,190,518	2,360,189	1%
Rate Stabilization Reserve	0	0	0	0	0	0%
DMO Premiums	39,323	79,099	86,618	52,259	(12,936)	-33%
Reinsurance						
Specific	4,291,326	8,606,716	7,346,345	4,291,288	38	0%
Total Loss Fund	200,881,356	401,830,997	346,312,349	198,534,065	2,347,292	1%
Expenses						
Legal	18,801	37,601	37,601	18,904	(103)	-1%
Treasurer	12,955	25,910	25,910	12,955	0	0%
Administrator	994,767	1,995,179	1,694,833	994,784	(17)	0%
Program Manager	2,657,651	5,331,054	4,552,710	2,755,573	(97,923)	-4%
Local Entity Risk Management	2,944,821	5,919,614	4,742,157	2,945,230	(410)	0%
TPA - Med Aetna	3,571,326	6,643,062	6,548,993	3,580,034	(3,229)	0%
Program Manager - Guardian Nurses	475,574	953,814	814,137	528,500	(52,926)	-11%
TPA - Med AmeriHealth Admin	952,591	1,849,486	1,439,640	951,700	891	0%
TPA - Med Horizon	13,999	26,308	22,440	14,283	(285)	-2%
TPA - Vision	5,479	10,745	10,789	Included above in Med Aetna		
TPA - Dental	110,838	222,238	171,438	110,850	(12)	0%
Actuary	14,867	29,733	29,733	14,575	292	2%
Auditor	10,098	20,196	20,196	10,098	0	0%
Subtotal Expenses	11,783,765	23,064,940	20,110,577	11,937,487	(153,722)	-1%
Misc/Contingent Expenses	22,941	45,881	45,881	4,678	18,262	80%
Data Analysis System	60,185	120,369	120,369	60,185	(0)	0%
Wellness Program	284,317	570,229	486,724	284,418	(101)	0%
Affordable Care Act Taxes	70,164	140,742	120,144	70,186	(22)	0%
A4 Retiree Surcharge	3,156,165	6,312,928	5,452,031	3,156,633	(468)	0%
Plan Documents	15,000	30,000	30,000	15,000	-	0%
Enrollment Audits	0	0	0	0	-	0%
Total Expenses	15,392,535	30,285,089	26,365,726	15,528,587	(136,052)	-1%
Total Budget	216,273,892	432,116,086	372,678,075	214,062,652	2,211,240	1%

SCHOOLS HEALTH INSURANCE FUND					
2022-2023 Proposed Budget					
	Census:	Monthly Census	Annual Census		
	Medical - Aetna	14,502	174,024		
	Medical - AmeriHealth Admin	4,167	50,004		
	Medical - Horizon	39	468		
	Rx	9,117	109,404		
	Dental	5,951	71,412		
	Vision	962	11,544		
	Rx No Medical (Incl in Rx above)	15	180		
	Dental Only (Incl in Dental above)	502	6,024		
	DMO Only	6	72		
	LINE ITEMS	2021-2022 Annualized Budget	2022-2023 Proposed Budget	\$ Change	% Change
1	Claims				
2	Medical Claims	\$ 350,898,959	\$ 370,737,727	\$ 19,838,768	5.65%
3	Prescription Claims	\$ 38,115,061	\$ 32,124,992	\$ (5,990,069)	-15.72%
4	Dental Claims	\$ 4,849,902	\$ 4,812,181	\$ (37,721)	-0.78%
5	Subtotal	\$ 393,863,922	\$ 407,674,900	\$ 13,810,978	3.51%
6					
7	Rate Stabilization Reserve	\$ -	\$ -	\$ -	0.00%
8					
9	DMO Premiums	\$ 79,279	\$ 82,066	\$ 2,786	3.51%
10					
11	Reinsurance				
12	Specific	\$ 8,629,626	\$ 8,896,097	\$ 266,471	3.09%
13					
14	Total Loss Fund	\$ 402,572,828	\$ 416,653,063	\$ 14,080,235	3.50%
15					
16	Professional and Administrative Expenses				
17	Legal	\$ 37,601	\$ 37,978	\$ 377	1.00%
18	Treasurer	\$ 25,910	\$ 26,428	\$ 518	2.00%
19	Administrator	\$ 2,000,808	\$ 2,039,388	\$ 38,580	1.93%
20	Program Manager	\$ 5,346,581	\$ 5,451,454	\$ 104,873	1.96%
21	Local Entity Risk Management	\$ 5,946,382	\$ 6,065,248	\$ 118,866	2.00%
22	Program Manager - Guardian Nurses	\$ 956,353	\$ 1,050,076	\$ 93,723	9.80%
23	TPA - Med Aetna	\$ 6,652,067	\$ 6,143,047	\$ (509,020)	-7.65%
24	TPA - Med AmeriHealth Admin	\$ 1,865,399	\$ 1,793,143	\$ (72,256)	-3.87%
25	TPA - Med Horizon	\$ 24,570	\$ 25,061	\$ 491	2.00%
26	TPA - Dental	\$ 222,805	\$ 222,805	\$ -	0.00%
27	TPA - Vision	\$ 10,505	\$ 10,505	\$ -	0.00%
28	Actuary	\$ 29,733	\$ 30,500	\$ 767	2.58%
29	Auditor	\$ 20,196	\$ 20,196	\$ -	0.00%
30	Subtotal	\$ 23,138,912	\$ 22,915,830	\$ (223,081)	-0.96%
31					
32	Misc/Contingent Expenses	\$ 49,288	\$ 56,889	\$ 7,601	15.42%
33	Data Analysis System	\$ 120,369	\$ 90,492	\$ (29,877)	-24.82%
34	Wellness Program	\$ 571,746	\$ 571,746	\$ -	0.00%
35	Affordable Care Act Taxes	\$ 141,138	\$ 141,138	\$ -	0.00%
36	A4 Retiree Surcharge	\$ 6,316,181	\$ 6,673,279	\$ 357,098	5.65%
37	Plan Documents	\$ 30,000	\$ 30,000	\$ -	0.00%
38					
39	Subtotal	\$ 7,228,723	\$ 7,563,545	\$ 334,822	4.63%
40					
41	Total Expenses	\$ 30,367,635	\$ 30,479,375	\$ 111,740	0.37%
42					
43	Total Budget	\$ 432,940,462	\$ 447,132,438	\$ 14,191,976	3.28%
44	Dividend Applied to rates	\$ 319,366	\$ -		
45	Total Billing	\$ 432,621,096	\$ 447,132,438	\$ 14,511,342	3.35%

2022/2023 SHIF Budget Allocation



RETAINED DIVIDENDS- As of January 31, 2022

MEMBER	Retained Dividend
ALEXANDRIA TOWNSHIP BOE	86,926.81
ALLOWAY TOWNSHIP BOE	12,176.35
BELLMAWR PUBLIC SCHOOL DISTRICT	156,695.69
BERLIN BOROUGH BOE	200,260.52
BLACK HORSE PIKE REGIONAL BOE	1,703,859.61
BLAIRSTOWN BOE	39,613.56
BURLINGTON TOWNSHIP BOE	266,773.22
BYRAM TOWNSHIP BOE	204,891.42
CHESTERFIELD BOE	16,436.54
CINNAMINSON TOWNSHIP BOE	1,295,369.25
CITY OF BURLINGTON BOE	635,837.91
CLAYTON BOE	70,362.34
CLAYTON BOE	69,813.67
DELRAN TWNSP PUBLIC SCHOOLS	329,674.22
DELSEA REGIONAL BOE	1,368,023.12
DEPTFORD TOWNSHIP BOE	162,378.78
EATONTOWN BOE	113,037.79
EIRC	150,787.34
EVESHAM TOWNSHIP BOE	359,046.87
EWING TOWNSHIP BOE	111,424.13
FRANKFORD TOWNSHIP BOE	424,453.04
FREDON TOWNSHIP BOE	80.11
FRELINGHUYSEN TOWNSHIP BOE	10,035.32
GATEWAY REGIONAL BOE	589,793.70
GLASSBORO BOE	167,293.67
GLEN RIDGE PUBLIC SCHOOLS	122,090.11
HAINESPORT TOWNSHIP BOE	21,406.26
HARDYSTON TOWNSHIP BOE	404,881.53
HARRISON TOWNSHIP BOE	193.99
HIGH POINT REGIONAL BOE	211.77
HOPE TOWNSHIP SCHOOL DISTRICT	11,085.39
JAMESBURG BOE	55,758.23
LEAP ACADEMY UNIVERSITY CHARTER SCHOOL	91,011.09
LEBANON TOWNSHIP BOE	223,014.35
LENAPE VALLEY REGIONAL BOE	52,771.19
LOGAN TOWNSHIP BOE	464,042.35
LOWER ALLOWAYS CREEK BOE	47,898.44
LUMBERTON TOWNSHIP BOE	33,331.57
MANSFIELD TOWNSHIP BOE	33,763.55
MANTUA TOWNSHIP BOE	111,027.46
MEDFORD LAKES BOE	263,181.62
MEDFORD TOWNSHIP BOE	833,548.25
MONROE BOE	285.57
MOORESTOWN TOWNSHIP PUBLIC SCHOOLS	1,724,158.60

MT. HOLLY TOWNSHIP BOE	581,587.38
MT. LAUREL TOWNSHIP SCHOOLS	1,669,906.10
NORTHERN BURLINGTON COUNTY REGIONAL SCHOOL DISTRICT	126,855.58
OGDENSBURG BOROUGH SCHOOL DSTRC.	73,822.00
PAULSBORO BOE	19,198.67
PAULSBORO PUBLIC SCHOOLS	68,189.97
PINELANDS REGIONAL SCHOOL DISTRICT	156,102.91
POHATCONG TOWNSHIP BOE	4,193.45
RANOCAS VALLEY REGIONAL BOE	598,014.72
RIVERSIDE TOWNSHIP BOE	750,296.05
SCHOOL DISTRICT OF THE CHATHAMS	259.14
SOUTHAMPTON TOWNSHIP BOE	335,949.16
SPARTA BOE	217.80
STILLWATER TOWNSHIP BOE	13,265.39
SWEDESBORO-WOOLWICH BOE	264,290.99
TABERNACLE BOE	265,926.04
UPPER PITTSBORO BOE	120,541.70
VOORHEES TOWNSHIP BOE	128,114.08
WASHINGTON BOROUGH BOE	20,030.53
WATCHUNG HILLS REGIONAL HIGH SCHOOL	160,006.98
WEST DEPTFORD BOE	1,542.87
WHITE TOWNSHIP	24,073.55
WOODBURY HEIGHTS BOE	112,907.60
WOODSTOWN-PILESBORO BOE	3,292.45
	18,696,974.38



AVAILABLE ONLINE AT NO COST ...

11th Annual MEL, MRHIF & NJCE Educational Seminar

FRIDAY, APRIL 29 ▶ 9:00 A.M. – NOON

FRIDAY, MAY 6 ▶ 9:00 A.M. – NOON

Designed specifically for elected officials, commissioners, municipal, county and authority personnel, risk managers and related professionals.

The seminar is eligible for the following continuing education credits:

- CFO/CMFO Public Works and Clerks
- Insurance Producers and Purchasing Agents
- Accountants (CPA) and Lawyers (CLE)
- Water Supply and Wastewater Licensed Operators (Total Contact Hours)
- Registered Public Purchasing Official (RPPO)
- Qualified Purchasing Agent (QPA)

TO REGISTER

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**NEW JERSEY COUNTIES
EXCESS JOINT INSURANCE FUND**

AGENDA

FRIDAY, APRIL 29

KEYNOTE

The Local Government
Ethics Law

Jacquelyn Suarez,
Director NJ Division of Local
Government Services

CYBER ISSUES

Combating Cyber Attacks

BENEFITS ISSUES

Controlling Benefits Costs

FRIDAY, MAY 6

ETHICS

Ethics in Local Elections

SAFETY

Safety in the COVID Era

RISK MANAGEMENT

Local Government Risk
Management

THE POWER OF COLLABORATION

njmel.org

REGULATORY
SCHOOLS HEALTH INSURANCE FUND
YEAR: 2021/2022 - As of February 15, 2022

<u>Monthly Items</u>	<u>Filing Status</u>
Budget	Filed
Assessments	Filed
Actuarial Certification	Filed
Reinsurance Policies	Filed
Fund Commissioners	Filed
Fund Officers	Filed
Renewal Resolutions	Filed
Indemnity and Trust	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, 2021 - 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
Sandyston-Walpack Consolidated School District	12/31/2021
Springfield Township BOE	12/31/2021

School's Health Insurance Fund

Program Manager's Report

February 2022

Program Manager: Conner Strong & Buckelew

Online Enrollment Training: shif_enrollments@permainc.com

Enrollments/Eligibility/Billing: shif_enrollments@permainc.com

Brokers: brokerservice@permainc.com

COVERAGE UPDATES:

Covid-19 Oral Prescriptions:

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

1- Pfizer- Paxlovid

2- Merck- Molnupiravir

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

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

2021 LEGISLATIVE REVIEW

COVID -19

1. National Emergency Declaration - Extended through April 15, 2022

- Qualified Beneficiaries may wait one year to elect COBRA but must then start to make premium payments
- Individual has a maximum of one year from date of payment originally would have due, including any applicable grace period
- Under special transition rule- certain premium payments are not required to be made before 11/1/21.

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

Coverage Highlights:

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

FREE Tests from the Government:

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

ESI Highlights:

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

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

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

Mental Health Parity and Addition Equality Act (MHPAE)

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

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

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

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

Surprise Billing and Transparency – Continued Delays

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

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

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

OPERATIONS UPDATES

AmeriHealth Administrators has advised the Program Manager that all SHIF member information sent to their contracted HSA vendor in error has been terminated in the HSA vendor's system. If contacted, please advise members they do not need to contact the HSA vendor and they can disregard the information and debit card received.

- Please note this only impacts SHIF groups that have AmeriHealth Administrators medical coverage and/or groups who had AmeriHealth medical coverage with an HSA and the HSA plan was not elected by the employee. This in no way affects the member's medical coverage with AmeriHealth Administrators.
- AmeriHealth is sending impacted members letters advising they can disregard the information received.

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 into 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 (10/19 – 9/20 vs. 10/20 – 9/21)

- There were 15,253 distinct members who had MSK Episodes, representing 29% of the total SHIF enrollment, increase of 31.5% over the previous period.
 - Percentage makes up 16% of the total spend, medical and Rx.
 - MSK pharmacy spend is 4% of the total pharmacy budget.
- Total cost of MSK Episodes grew to \$41,800,495, an increase of 23.4% which is in line with the general population rise of the SHIF.
- Please reference MSK report included with agenda.

Q2 – Women’s Health and Gaps in Care

Q3 – Men’s Health and Gaps in Care

Q4 – TBD

Administrative Authorization:

Date	Appeal Type	Determination
February 2022	Medical Appeal	Denial Upheld

Memorandum

TO: SHIF Commissioners and Professionals
FROM: Office of the Program Manager
SUBJECT: MSK Utilization
DATE: February 2022

SHIF Inflammatory Conditions Utilization – Artemis Reporting

The below is an overview of key observations of claims related to Musculoskeletal Inflammation Conditions (MSK) showing the 12 month period (10/20-9/21) versus the previous period (10/19-9/20).

Musculoskeletal Conditions: Pain in the muscles, bones, ligaments, tendons, and nerves. You can feel this pain in just one area of the body, such as your back. You can also have it throughout your body if you have a widespread condition like fibromyalgia. ¹

An episode is a summary of inpatient and outpatient services and costs, by condition, over a discrete time period. When breaking down data by episodes, we are facilitating analysis of specific conditions, disease profiling of the population, and comparing provider performance reviews.

MSK Demographics

- Based on the current period, there were 16,253 distinct members who had MSK Episodes which is representative of 29% of the total SHIF Enrollment
 - Rise of 31.5% from the previous period
- This takes up 16% of the total spend (Med and Rx) of the Fund
- Total Fund Premium grew 24.3% from June 30th, 2020 – June 30th, 2021 (Pulled from 2021 Audit)
- MSK Pharmacy spend is 4% of total pharmacy budget
- Aging populations are more likely to have an MSK Episode in all cases except ages 10-19 who are more likely to have an episode than ages 20-29

Period Comparison: Medical

While there is the increase of 31.5% of unique claimants from the previous period, this falls in line with the growth of the fund as the number of unique claimants per 1,000 members has only increased by 3%. Total cost of MSK Episodes grew to \$41,800,495, an increase of 23.4% which is in line with the general population rise of the SHIF. However, there was also a decrease of 8.2% based on the average amount paid per episode (\$1,516 to \$1,392 per episode) so even though the total amount paid out increased, the reduction in average cost per episode may indicate that these are being managed more efficiently.

1. Healthline.com

Period Comparison: Pharmacy

Total pharmacy spend stayed essentially flat even with the increase in membership only growing by 0.6%. Once again showing a decrease in Per Member Per Month cost of \$52.97 or a 25.9% decrease from the previous period. There is also a decrease in Per Episode Per Month cost of 25.7% which further illustrates that these conditions are likely being treated more efficiently than over the previous period.

Key Takeaways

Even with an increase in total cost of \$7,930,259 over the previous period, this is actually a manageable growth of cost due to the increase in membership in the SHIF over the same time. Over the most recent period we can assume that members have been managing their MSK conditions more efficiently, this could be a result as at home or telemedicine use throughout the Covid Pandemic.

Next Steps

In order to confirm our assumptions that these conditions have become much more financially manageable for the Fund we must understand what was done differently in one period to the other. Naturally, these last two periods are under some influence of the Coronavirus, however, there was enough of a difference that would warrant there was differing behavior between these two time frames. With people returning to their usual routines as the pandemic subsides, we are looking to continue to reduce costs as they relate to MSK. We are taking a cursory look into MSK management solutions that would reduce the overall cost to the fund as well as increase the total benefit to members through multiple care management options.



Schools Health Insurance Fund
Board Meeting Summary
February 15, 2022



Total Referrals		1/7/22 through 2/9/22	1/7/21 through 2/9/21
Total Referrals		166	276
Total Referrals (ACUTE)	(62 HSX)	142	233
Total Referrals (COMPLEX)		24	43
Hospitalizations			
Total Members Hospitalized		78 hospitalizations	77 hospitalizations
Members Requiring ICU Level Care		8	3
Readmissions		0	---
Complex Care Member Admissions		0	1
Mobilizations---Acute		54	11
Inpatient Visits		39	1
Accompaniments		9	3
Home Visits		6	7
Mobilizations---Complex Program		7	9
Inpatient Visits		3	1
Accompaniments		3	7
Home Visits		1	1
Potential High Claimants related to COVID-19		Status	Plan
Patient #1 Member		6 weeks inpatient	Remains inpatient
Potential High Claimants: 1/7/2022-2/9/2022		Status	Insurer
Potential Claimant			
HC #1 Member	Cerebral infarct	ICU; Acute Rehab	Aetna
HC #2 Spouse	Surgery	ICU x 1 day; home	AmeriHealth
HC #3 Member	Oncology; surgery	ICU x 4 days; readmitted	Aetna
HC #4 Spouse	Spinal tumor	ICU x 3 days; home	Aetna
HC #5 Twin A	Premature	Remains in NICU	Aetna
HC #6 Twin B	Premature	Remains in NICU	Aetna
HC #7 Twin A	Premature	Remains in NICU	Aetna
HC #8 Twin B	Premature	Remains in NICU	Aetna
HC #9 Member	IVIG every 2 weeks	Homecare	Aetna

Lighting Your Way Through the Healthcare Maze
GuardianNurses.com

SCHOOL HEALTH INSURANCE FUND

BILLS LIST

Confirmation of Payment

DECEMBER 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 21-22

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
003153			
003153	CONNER STRONG & BUCKELEW	RX - PROGRAM MANAGER FEES 12/21	54,562.14
003153	CONNER STRONG & BUCKELEW	MEDICAL - PROGRAM MANAGER FEES 12/21	367,807.44
003153	CONNER STRONG & BUCKELEW	BROKER FEES 12/21	495,030.71
003153	CONNER STRONG & BUCKELEW	DENTAL - PROGRAM MANAGER FEES 12/21	15,857.88
003153	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 12/21	6,581.42
			939,839.59
		Total Payments FY 2021	939,839.59
		TOTAL PAYMENTS ALL FUND YEARS	939,839.59

Chairperson

Attest:

Dated: _____

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

SCHOOL HEALTH INSURANCE FUND SUPPLEMENTAL BILLS LIST

Confirmation of Payment

DECEMBER 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

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
003154			
003154	WELLNESS COACHES USA	SWEDESBORO WELLNESS 12/21	1,970.00
003154	WELLNESS COACHES USA	DELRAN WELLNESS 12/21	1,667.00
003154	WELLNESS COACHES USA	DELRAN GIFT CARD 12/21	50.00
			3,687.00
		Total Payments FY 20-21	3,687.00

FUND YEAR 21-22

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
003155			
003155	R-HEALTH, INC.	R-HEALTH MEMBERS 12/21	6,179.00
			6,179.00
003156			
003156	DELTA CARE DMO	BE004714635 - GLOUCESTER SS SD 12/21	658.67
003156	DELTA CARE DMO	BE004714592 - GLOUCESTER CNTY IOT 12/21	168.62
			827.29
003157			
003157	FLAGSHIP DENTAL PLANS	DMO PREMIUMS 11/21	1,740.00
003157	FLAGSHIP DENTAL PLANS	DMO PREMIUMS 11/21	333.85
			2,073.85
003158			
003158	DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 12/21	18,507.84
			18,507.84
003159			
003159	HORIZON BCBSNJ	MEDICAL TPA 12/21	2,153.00
			2,153.00
003160			
003160	AETNA LIFE INSURANCE COMPANY	VISION TPA 12/21	891.80
003160	AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 12/21	487,451.30
			488,343.10
003161			
003161	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 12/21	160,618.75
			160,618.75
003162			
003162	PAYFLEX	GREENWICH TWP BOE 11/21	3.00
003162	PAYFLEX	MOORESTOWN 11/21	57.00
			60.00
003163			
003163	PERMA RISK MANAGEMENT SERVICES	POSTAGE 11/21	87.97
003163	PERMA RISK MANAGEMENT SERVICES	ADMINISTRATION FEES 12/21	166,456.43
			166,544.40
003164			
003164	J. KENNETH HARRIS, ATTY AT LAW	PLAN DOCUMENT FEE 12/21	184.00
003164	J. KENNETH HARRIS, ATTY AT LAW	ATTORNEY FEES 12/21	3,102.75
			3,286.75
003165			
003165	VERRILL & VERRILL, LLC	TREASURER FEE 12/21	2,159.16
			2,159.16
003166			
003166	FORS GATE COUNTRY CLUB	DECEMBER 2021 MEETING CATERING	1,493.21
			1,493.21
003167			
003167	COURIER POST	ACCT #CHL-079881 - AD - 11.27.21	49.68
003167	COURIER POST	ACCT #254751 - BAL. FORWARD - 10.1.21	31.80
			81.48

003168			
003168	CONNER STRONG & BUCKELEW	ARTEMIS REIMBURSEMENT 10/21	16,578.42
			16,578.42
003169			
003169	BROWN & CONNERY LLP	PROF SERV - CURRY V BOMBARA & SHIF 11/21	337.61
			337.61
003170			
003170	RANOCAS VALLEY REG HSD	WELLNESS EVENT - AMY HEMPHILL 12/21	45.00
003170	RANOCAS VALLEY REG HSD	WELLNESS EVENT - AMANDA MICHALIC 11/21	40.00
003170	RANOCAS VALLEY REG HSD	WELLNESS REIM. - D. AROMANDA 11/21	80.00
003170	RANOCAS VALLEY REG HSD	WELLNESS SUPPLIES - KATHY TAYLOR 12/21	27.71
			192.71
003171			
003171	MELISSA SHEPPARD	WELLNESS SNACKS - TRITON HS 11/21	113.44
			113.44
003172			
003172	US WELLNESS INC.	BURLINGTON TWP 10/21	1,600.00
003172	US WELLNESS INC.	BURLINGTON TWP 8/21	1,250.00
			2,850.00
003173			
003173	JENNIFER BROWN	WELLNESS REIM. - TIMBER CREEK 11/21	237.28
			237.28
003174			
003174	MEDFORD LAKES BOARD OF EDUCATION	WELLNESS REIM. - TAVI CHALLENGE 12/21	275.00
			275.00
003175			
003175	AETNA BEHAVIORAL HEALTH LLC	LEAP ACADEMY 12/21	470.00
			470.00
003176			
003176	RITA GENGARO	WELLNESS REIM. - DIFF. & ESS. OILS 11/21	157.75
			157.75
003177			
003177	NJ ADVANCE MEDIA	ACCT #1000890821 - PAST DUE - 11.10.21	43.50
003177	NJ ADVANCE MEDIA	ACCT #1000890210 - AD - 11.30.21	18.60
003177	NJ ADVANCE MEDIA	ACCT #1000890281 - AD - 11.30.21	5.22
			67.32
003178			
003178	ADVANTA HEALTH SOLUTIONS INC	10/21 ACTIVEFIT+ PROGRAM INC. CREDITS	4,520.00
003178	ADVANTA HEALTH SOLUTIONS INC	12/21 ACTIVEFIT+ MANAGEMENT FEE	1,710.00
003178	ADVANTA HEALTH SOLUTIONS INC	12/21 ACTIVEFIT+ MANAGEMENT FEE	321.20
003178	ADVANTA HEALTH SOLUTIONS INC	10/21 ACTIVEFIT+ PROGRAM INC. CREDITS	140.00
			6,691.20
003179			
003179	XL SPORTS FITNESS	WELLNESS 2022 PILATES CLASSES	360.00
			360.00
003180			
003180	KERRI HIGGINS	REIMBURSED - CLASSES 10/21	250.00
			250.00
003181			
003181	CONNER STRONG & BUCKELEW	GUARDIAN NURSE FEE 12/21	87,500.00
			87,500.00
003182			
003182	ACCESS	ACCT #962 - ARC. AND STOR. - 11.30.21	11.56
			11.56
003183			
003183	MUNICIPAL REINSURANCE HIF	SPECIFIC REINSURANCE 12/21	717,597.92
			717,597.92
		Total Payments FY 21-22	1,686,018.04
		TOTAL PAYMENTS ALL FUND YEARS	1,689,705.04

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

Confirmation of Payment

JANUARY 2022

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 21-22

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
003184			
003184	CONNER STRONG & BUCKELEW	RX PROGRAM MANAGER FEES 1/22	54,603.96
003184	CONNER STRONG & BUCKELEW	MEDICAL PROGRAM MANAGER FEES 1/22	370,191.45
003184	CONNER STRONG & BUCKELEW	BROKER FEES 1/22	497,301.63
003184	CONNER STRONG & BUCKELEW	DENTAL PROGRAM MANAGER FEE 1/22	15,956.82
003184	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 1/22	6,623.99
			944,677.85
		Total Payments FY 2022	944,677.85
		TOTAL PAYMENTS ALL FUND YEARS	944,677.85

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 SUPPLEMENTAL BILLS LIST

Resolution No.

JANUARY 2022

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 21-22

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
003138			
003138	DELTACARE DMO	VOID AND REISSUE	-588.07
003138	DELTACARE DMO	VOID AND REISSUE	-168.62
			-756.69
003185			
003185	R-HEALTH, INC.	R-HEALTH MEMBERS 1/22	6,245.00
			6,245.00
003186			
003186	DELTACARE DMO	BE004661376 - GLOUCESTER SSSD 11/21	588.07
003186	DELTACARE DMO	BE004661333 - GLOUCESTER CNTY IOT 11/21	168.62
			756.69
003187			
003187	FLAGSHIP DENTAL PLANS	DMO PREMIUMS 12/21	3,620.94
003187	FLAGSHIP DENTAL PLANS	DMO PREMIUMS 12/21	1,645.82
003187	FLAGSHIP DENTAL PLANS	DMO PREMIUMS 12/21	6.28
003187	FLAGSHIP DENTAL PLANS	DMO RPEMIUMS 12/21	1,989.50
			7,262.54
003188			
003188	DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 1/22	18,623.28
			18,623.28
003189			
003189	HORIZON BCBSNJ	MEDICAL TPA 1/22	1,729.50
			1,729.50
003190			
003190	AETNA LIFE INSURANCE COMPANY	VISION TPA 1/22	883.61
003190	AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 1/22	513,133.10
			514,016.71
003191			
003191	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 1/22	151,037.07
			151,037.07
003192			
003192	PAYFLEX	MOORESTOWN 12/21	57.00
003192	PAYFLEX	CHATHAMS 12/21	24.00
003192	PAYFLEX	GREENWICH 12/21	3.00
			84.00
003193			
003193	PERMA RISK MANAGEMENT SERVICES	POSTAGE 12/21	122.89
003193	PERMA RISK MANAGEMENT SERVICES	ADMINISTRATION FEES 1/22	167,393.13
			167,516.02
003194			
003194	ACTUARIAL SOLUTIONS, LLC	1ST QUARTER 2022 ACTUARY FEES	7,433.50
			7,433.50
003195			
003195	J. KENNETH HARRIS, ATTY AT LAW	PLAN DOCUMENT FEE 1/22	759.00
003195	J. KENNETH HARRIS, ATTY AT LAW	ATTORNEY FEES 1/22	3,102.75
			3,861.75
003196			
003196	BOWMAN & COMPANY LLP	PROF. SERV. FOR SHIF AUDIT AS OF 6.30.21	19,800.00
			19,800.00
003197			
003197	VERRILL & VERRILL, LLC	TREASURER FEE 1/22	2,159.16
			2,159.16
003198			
003198	COURIER POST	ACCT #CHL-092208 - AUDIT SYN. - 12.29.21	114.48
			114.48
003199			
003199	SWEDESBORO-WOOLWICH BOE	PRIZES FOR MDG CHALLENGE 12/21	300.20
			300.20

003200			
003200	RANCOCAS VALLEY REG HSD	WELLNESS EVENTS 1/22	60.00
			60.00
003201			
003201	FRANKFORD TWP. BOARD OF EDUCATION	WELLNESS REIMBURSEMENTS 12/21	834.89
			834.89
003202			
003202	WELLNESS COACHES USA	WELLNESS COACHING - DELRAN 1/22	801.00
003202	WELLNESS COACHES USA	WELLNESS COACHING - SWEDESBORO 1/22	1,058.00
			1,859.00
003203			
003203	US WELLNESS INC.	BURLINGTON TOWNSHIP 11/21	1,600.00
			1,600.00
003204			
003204	TA VI HEALTH INC.	RIVERSIDE BOE 9/21	1,775.00
003204	TA VI HEALTH INC.	MEDFORD LAKES BOE 9/21	1,775.00
			3,550.00
003205			
003205	JENNIFER BROWN	WELLNESS LUNCH REIMBURSEMENT 12/21	74.97
			74.97
003206			
003206	AETNA BEHAVIORAL HEALTH LLC	LEAP ACADEMY 1/22	470.00
			470.00
003207			
003207	RIVERSIDE TOWNSHIP BOARD OF EDUCATION	REIM. FOR TEACHER WELLNESS AWARD 12/21	36.00
			36.00
003208			
003208	NJ ADVANCE MEDIA	ACCT #1000890281 - AUDIT SYN. - 12.28.21	80.91
003208	NJ ADVANCE MEDIA	ACCT #1000890210 - AUDIT SYN. - 12.28.21	332.52
			413.43
003209			
003209	ADVANTA HEALTH SOLUTIONS INC	11/21 ACTIVEFIT+ PROGRAM INC. CREDITS	4,500.00
003209	ADVANTA HEALTH SOLUTIONS INC	1/22 ACTIVEFIT+ MANAGEMENT FEE	1,715.00
003209	ADVANTA HEALTH SOLUTIONS INC	1/22 ACTIVEFIT+ MANAGEMENT FEE	321.20
003209	ADVANTA HEALTH SOLUTIONS INC	11/21 ACTIVEFIT+ PROGRAM INC. CREDITS	120.00
			6,656.20
003210			
003210	BURLINGTON TOWNSHIP FOOD PANTRY	CHALLENGE WINNER CHARITY DONATION 1/22	1,000.00
			1,000.00
003211			
003211	VOORHEES TOWNSHIP BOARD OF EDUCATION	PRASADA WELLNESS BALANCE 1/22	3,274.00
003211	VOORHEES TOWNSHIP BOARD OF EDUCATION	TA VI CHALLENGE WINNERS 12/21	600.00
			3,874.00
003212			
003212	XL FITNESS	MARCH 2022 SESSIONS	450.00
			450.00
003213			
003213	CONNER STRONG & BUCKELEW	GUARDIAN NURSE FEE 1/22	87,500.00
			87,500.00
003214			
003214	ACCESS	ACCT #962 - ARC. AND STOR. - 12.31.21	11.56
			11.56
003215			
003215	YOGA IN COLOR, LLC	PRIVATE YOGA GROUP 1/22	420.00
003215	YOGA IN COLOR, LLC	PRIVATE YOGA GROUP 11/21-12/21	480.00
			900.00
003216			
003216	MUNICIPAL REINSURANCE HIF	SPECIFIC REINSURANCE 1/22	722,249.16
			722,249.16
		Total Payments FY 21-22	1,731,722.42
		TOTAL PAYMENTS ALL FUND YEARS	1,731,722.42

Chairperson

Attest:

Dated: _____

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

Treasurer

SCHOOLS HEALTH INSURANCE FUND

SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED

Current Fund Year: 2022										
Month Ending: January										
	Medical	Dental	Rx	Dividend Payabl	Med.Adv	Reinsurance	abilization (BO	LFC	Admin	TOTAL
OPEN BALANCE	140,570,778.47	1,210,361.08	5,083,179.16	(1,752,941.20)	0.00	(478,926.34)	887,599.24	0.00	11,836,672.01	157,356,722.42
RECEIPTS										
Assessments	17,287,892.70	240,579.72	1,852,685.92	0.00	0.00	424,851.65	0.00	0.00	1,521,613.01	21,327,623.00
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Invest Pymnts	72,781.33	622.57	3,395.16	0.00	0.00	4.10	456.55	0.00	6,088.35	83,348.06
Invest Adj	(0.06)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(0.06)
Subtotal Invest	72,781.27	622.57	3,395.16	0.00	0.00	4.10	456.55	0.00	6,088.35	83,348.00
Other *	100,237.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	100,237.48
TOTAL	17,460,911.45	241,202.29	1,856,081.08	0.00	0.00	424,855.75	456.55	0.00	1,527,701.36	21,511,208.48
EXPENSES										
Claims Transfers	27,049,645.77	390,551.25	3,947,583.08	0.00	0.00	0.00	0.00	0.00	0.00	31,387,780.10
Expenses	6,245.00	7,262.54	0.00	0.00	0.00	722,249.16	0.00	0.00	1,940,643.57	2,676,400.27
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	27,055,890.77	397,813.79	3,947,583.08	0.00	0.00	722,249.16	0.00	0.00	1,940,643.57	34,064,180.37
END BALANCE	130,975,799.15	1,053,749.58	2,991,677.16	(1,752,941.20)	0.00	(776,319.75)	888,055.79	0.00	11,423,729.80	144,803,750.53

CERTIFICATION AND RECONCILIATION OF CLAIMS PAYMENTS AND RECOVERIES									
SCHOOLS HEALTH INSURANCE FUND									
Month		January							
Current Fund Year		2022							
		1.	2.	3.	4.	5.	6.	7.	8.
Policy		Calc. Net	Monthly	Monthly	Calc. Net	TPA Net	Variance	Delinquent	Change
Year	Coverage	Paid Thru	Net Paid	Recoveries	Paid Thru	Paid Thru	To Be	Unreconciled	This
		Last Month	January	January	January	January	Reconciled	Variance From	Month
2021	Medical	169,118,061.70	27,049,645.77	0.00	196,167,707.47	0.00	196,167,707.47	169,118,061.70	27,049,645.77
	Dental	2,105,400.87	390,551.25	0.00	2,495,952.12	0.00	2,495,952.12	2,105,400.87	390,551.25
	Rx	21,358,468.76	3,947,583.08	0.00	25,306,051.84	0.00	25,306,051.84	21,358,468.76	3,947,583.08
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	192,581,931.33	31,387,780.10	0.00	223,969,711.43	0.00	223,969,711.43	192,581,931.33	31,387,780.10

SUMMARY OF CASH AND INVESTMENT INSTRUMENTS												
SCHOOLS HEALTH INSURANCE FUND												
ALL FUND YEARS COMBINED												
CURRENT MONTH	January											
CURRENT FUND YEAR	2022											
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)									3/13/2022			4/12/2022
Purchase Yield:		0.65	0.65	0.65	0.15	0.01	0.06	0.60	0.90	0.50		1.00
TOTAL for All Accts & instruments												
Opening Cash & Investment Balance	\$ 157,356,722.47	\$ 8,668,984.20	\$ 115,953.54	\$ 124,995,634.82	\$ 38,771.59	\$ 894.57	\$ 88,494.05	\$ 12,193,526.36	\$ 5,000,000.00	\$ 254,463.34	\$ 6,000,000.00	
Opening Interest Accrual Balance	\$ 0.01	\$ -	\$ -	\$ -	\$ -	\$ 0.01	\$ -	\$ -	\$ -	\$ -	\$ -	
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	\$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	\$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	\$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	\$0.00
5 Interest Paid - Cash Instr.s	\$83,348.05	\$2,165.84	\$171.07	\$66,127.71	\$4.94	\$0.00	\$3.96	\$5,848.66	\$3,821.92	\$108.06	\$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	\$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	\$0.00
8 Net Investment Income	\$83,348.06	\$2,165.84	\$171.07	\$66,127.71	\$4.94	\$0.01	\$3.96	\$5,848.66	\$3,821.92	\$108.06	\$5,095.89	
9 Deposits - Purchases	\$36,113,178.56	\$33,427,860.48	\$2,676,400.27	\$0.00	\$0.00	\$0.00	\$0.00	\$8,917.81	\$0.00	\$0.00	\$0.00	\$0.00
10 (Withdrawals - Sales)	-\$48,749,498.56	-\$34,064,180.37	-\$2,676,400.27	-\$12,000,000.00	\$0.00	-\$0.11	\$0.00	\$0.00	-\$3,821.92	\$0.00	\$0.00	-\$5,095.89
		OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	
Ending Cash & Investment Balance	\$144,803,750.53	\$8,034,830.15	\$116,124.61	\$113,061,762.53	\$38,776.53	\$894.47	\$88,498.01	\$12,208,292.83	\$5,000,000.00	\$254,571.40	\$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	\$0.00
Plus Outstanding Checks	\$4,412,714.38	\$1,731,722.42	\$2,680,991.96	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
(Less Deposits in Transit)	-\$1,731,722.42	\$0.00	-\$1,731,722.42	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Balance per Bank	\$147,484,742.49	\$9,766,552.57	\$1,065,394.15	\$113,061,762.53	\$38,776.53	\$894.47	\$88,498.01	\$12,208,292.83	\$5,000,000.00	\$254,571.40	\$6,000,000.00	

RESOLUTION NO. 6-22

**SCHOOLS HEALTH INSURANCE FUND
APPROVAL OF THE DECEMBER 2021 and JANUARY 2022 BILLS LIST AND TREASURERS
REPORT**

WHEREAS, the **Schools Health Insurance Fund** (the “Fund”) held a Public Meeting on **February 23, 2022** for the purposes of conducting the official business of the Fund; and

WHEREAS, The Treasurer for the Fund presented bills lists to satisfy outstanding costs incurred for operating the Fund during the months of December 2021 and January 2022 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 December 2021 and January 2022 prepared by the Treasurer of the Fund and duly authorize and concur said bills to be paid expeditiously, in accordance with the laws and regulations promulgated by the State of New Jersey for 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: February 23, 2022

BY: _____
CHAIRPERSON

ATTEST: _____
SECRETARY



SCHOOLS HEALTH INSURANCE FUND

Monthly Claim Activity Report

February 23, 2022



SCHOOLS HEALTH INSURANCE FUND

	MEDICAL CLAIMS PAID 2020-2021	# OF EES	PER EE	MEDICAL CLAIMS PAID 2021-2022	# OF EES	PER 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	\$ 21,948,287	14,542	\$ 1,509
DECEMBER	\$16,700,894	11,329	\$ 1,474	\$ 24,408,315	14,547	\$ 1,678
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			\$133,439,122		
				2021-2022 Avg.	14,513	\$ 1,534
				2020-2021 Avg.	12,141	\$ 1,458

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

Plan Sponsor Unique ID : All
Customer: Schools Health Insurance Fund
Group / Control: 00141839,00169498,00169659,00737392,00737419

Paid Dates: 12/01/2021 - 12/31/2021
Service Dates: 01/01/2011 - 12/31/2021
Line of Business: All

	Billed Amt	Paid Amt	Diagnosis/Treatment
	\$2,143,347.98	\$539,794.27	BURN OF THIRD DEGREE OF LEFT FOREARM, INITIAL
	\$299,631.45	\$234,732.33	HODGKIN LYMPHOMA, UNSPECIFIED, LYMPH NODES
	\$3,808,026.84	\$213,510.19	HEMOPHAGOCYTIC LYMPHOHISTOCYTOSIS
	\$712,044.20	\$176,531.28	SINGLE LIVEBORN INFANT, DELIVERED VAGINALLY
	\$680,962.68	\$175,501.83	SINGLE LIVEBORN INFANT, DELIVERED BY CESAREAN
	\$613,673.09	\$138,964.14	NONTRAUMATIC INTRACEREBRAL
	\$134,953.91	\$134,810.05	MULTIPLE SCLEROSIS
	\$461,756.54	\$132,501.21	PARASTOMAL HERNIA WITHOUT OBSTRUCTION OR
	\$225,953.32	\$121,550.53	OTHER EXTRAARTICULAR FRACTURE OF LOWER END
	\$207,518.08	\$110,651.68	SEPSIS, UNSPECIFIED ORGANISM
	\$87,434.93	\$106,839.26	BRACHIAL PLEXUS DISORDERS
	\$246,762.66	\$105,774.71	BRADYCARDIA, UNSPECIFIED
	\$315,334.30	\$104,151.71	SEPSIS DUE TO ESCHERICHIA COLI (E. COLI)
Total:	\$9,937,399.98	\$2,295,313.19	



Schools Health Insurance Fund
1/1/21 through 12/31/21 (Unless otherwise noted)

Dashboard

Medical Claims Paid Per Employee July 2021 – December 2021

Total Medical Paid per Employee:
\$1,534

Network Discounts

Inpatient:	68.1%
Ambulatory:	66.9%
Physician/Other:	61.5%
TOTAL:	65.1%

Provider Network

% Admissions In-Network:	97.5%
% Physician Office:	95.9%

Aetna Book of Business:
Admissions 97.8%; Physician 91.7%

Top Facilities Utilized (by total Medical Spend)

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

Claimants Over \$50,000 (January 2021 - December 2021)

Number of Claims Over \$50,000: **668**
Claimants per 1000 members: **17.9**
Avg. Paid per Claimant: **\$120,678**
Percent of Total Paid: **34.1%**
• Aetna BOB- HCC account for an
average of 39.7% of total Medical Cost

Teladoc Activity: Jan 20221– December 2021

Total Registrations: **1,314**
Total Online Visits: **1,707**
Total Net Claims Savings: **\$230,137**
Total Visits w/ Rx: **1,077**

Utilization by Age

0-17: 8.4%
18-26: 14.8%
27-30: 7.9%
31-45: 40.3%
46-55: 17.8%
55-65: 9.8%
66+: 1.1%

Mental Health Visits: **496**
Dermatology Visits: **92**

New

Allentown Service Center Performance: Metrics thru DEC. 2021

Customer Service Results

1 st Call Resolution:	95.0%
Abandonment Rate:	8.8%
Avg. Speed of Answer:	193.2 sec

Claims Performance Results

Financial Accuracy:	98.78%
90% processed w/in:	11.8 days
95% processed w/in:	23.9 days

Performance Goals

1 st Call Resolution:	90%
Abandonment Rate less than:	3.0%
Average Speed of Answer:	30 sec
Financial Accuracy:	99%
90% processed w/in:	14 days
95% processed w/in:	30 days

COVID-19 population alerts

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

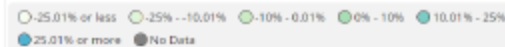
The map shows how the number of new cases have CHANGED in the last two weeks across the U.S. (not plan sponsor-specific). This provides an indication of which direction the level of new cases is trending.

County Alerts (below)

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

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

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



Heat map of recent growth by county: This map shows the percentage change in cases between the last seven days and the previous seven days. Darker colors indicate an increasing trend while lighter colors indicate a decreasing trend. Last Updated: 02/07/2022 | Source: CDC

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

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

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

State, County	County population	Your members	Avg daily new cases per 100K
NJ, Burlington	445,349	10,882	49.5
NJ, Camden	506,471	6,711	43.3
NJ, Gloucester	291,636	5,827	50.3
NJ, Morris	491,845	2,139	31.1
NJ, Sussex	140,488	1,803	36.5
NJ, Hunterdon	124,371	1,735	37.3
NJ, Mercer	367,430	1,375	39.6
NJ, Warren	105,267	1,222	39.2
NJ, Ocean	607,186	1,148	42.5
NJ, Monmouth	618,795	956	34.7
NJ, Salem	62,385	725	47.9
NJ, Somerset	328,934	688	27.2
PA, Bucks	628,270	548	40.5
NJ, Bergen	932,202	498	32.3
NJ, Union	556,341	446	30.2
PA, Northampton	305,285	438	46.9
NJ, Middlesex	825,062	389	30.3
NJ, Atlantic	263,670	364	45.2
NJ, Passaic	501,826	335	29.3
NJ, Cumberland	149,527	249	65.4
PA, Philadelphia	1,584,064	133	30.8
PA, Delaware	566,747	98	37.6
PA, Montgomery	830,915	81	40.4
NJ, Cape May	92,039	78	42.7
PA, Monroe	170,271	55	45.2

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

State, County	County population	Your members	Avg daily new cases per 100K
NJ, Essex	798,975	515	23.1
MD, Baltimore city	593,490	1	18.9

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







COVID-19 Claims Activity

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

Use these insights to:

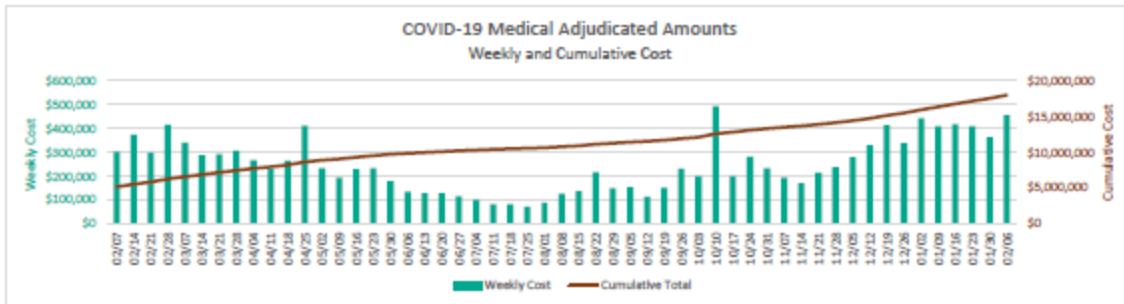
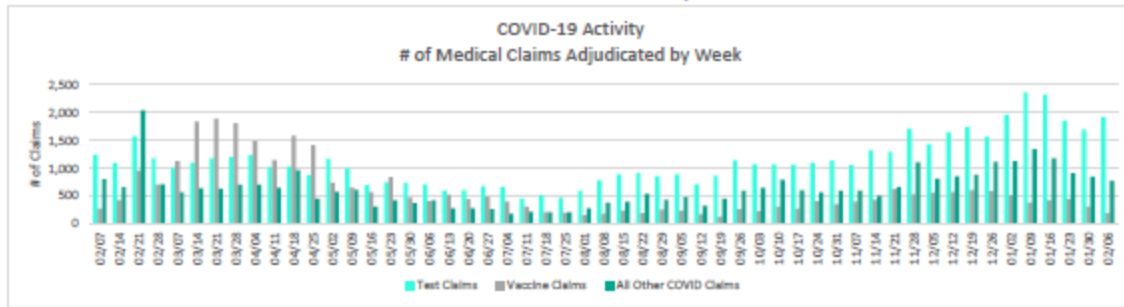
- ✓ Monitor estimated weekly plan expenses associated with COVID-19
- ✓ Understand the relative impact on overall claim spend

At a glance

		Number of Claims		Unique Claimants (claimants may be counted in each category)		
						
	COVID-19 paid	Tests	Vaccine	Tests	Vaccine Administration*	All Other
Current Week	\$455,343	1,918	205	1,486	193	683
3/01/20 - 2/06/22	\$18,039,297	83,707	32,040	29,764	17,291	19,869

*Vaccine data includes medical and pharmacy for Aetna administered plans

How does this week compare to previous weeks?



Telemedicine Monitor

What is the recent Telemedicine claims activity?

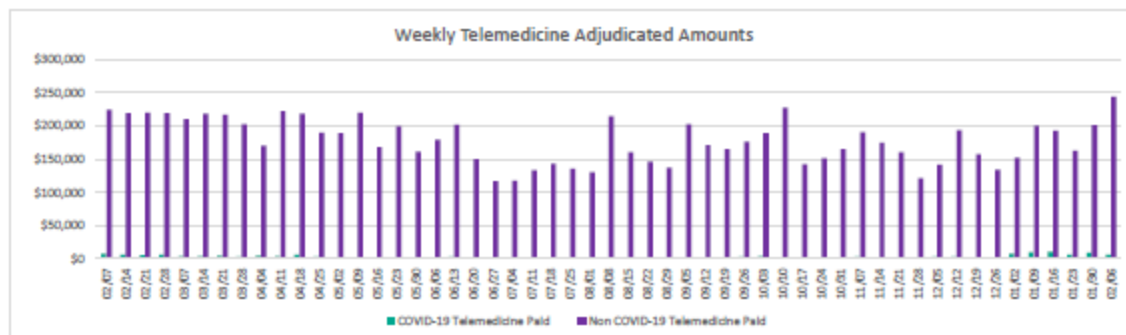
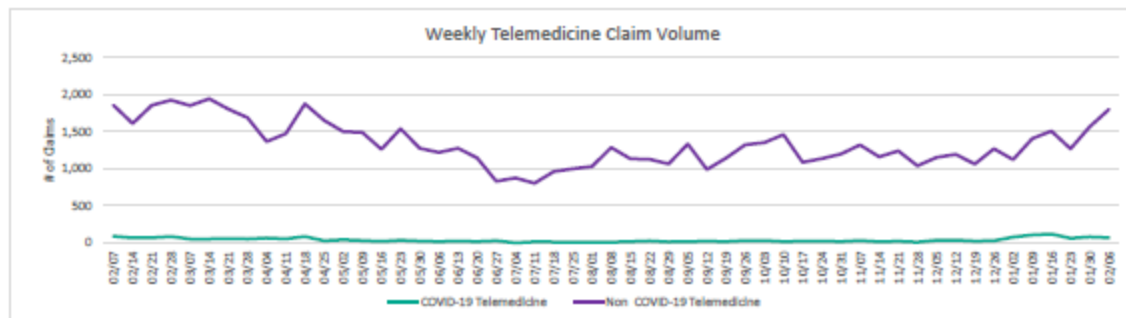
Use these insights to:

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

At a glance

	 COVID-19 telemedicine paid	 Non COVID-19 telemedicine paid	 COVID-19 telemedicine claims	 Non COVID-19 telemedicine claims
Current Week	\$6,297	\$243,922	72	1,798
3/01/20 - 2/06/22	\$363,953	\$16,578,345	4,140	132,432

How is Telemedicine changing over time?



Total Weekly Adjudicated Medical Claims

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

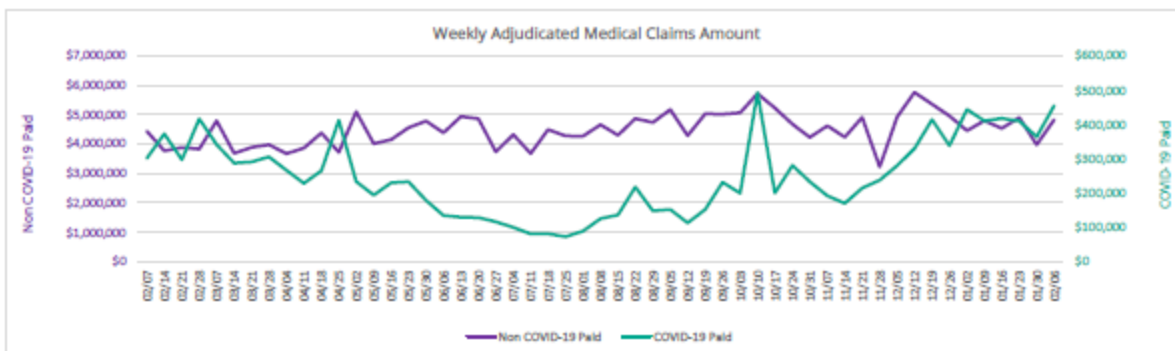
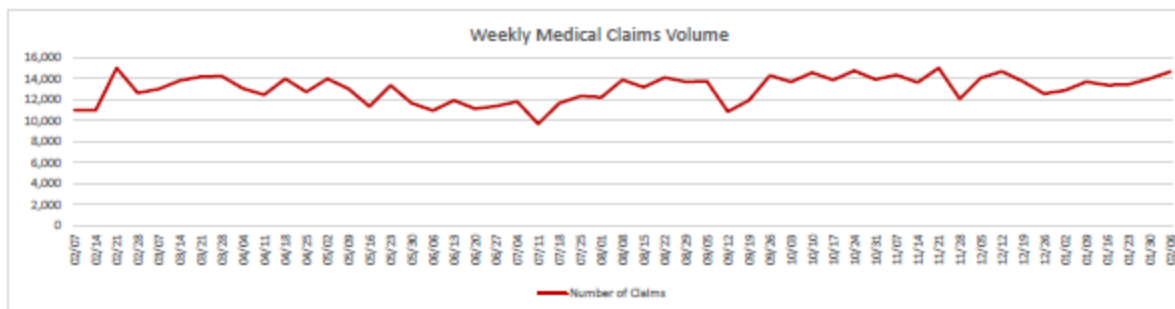
Use these insights to:

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

At a glance



How does this week compare to previous weeks?



SCHOOL HEALTH INSURANCE FUND - 93807101

COVID-19 Weekly Update

Group Number(s): 141839,737392,737419,169659,169498



Actual paid claim amounts may vary from this report once claims are finalized.
The information in this report is intended to provide weekly insights as a leading indicator based on the information available,
which may differ from final results.
Data in this report is from March 1, 2020 to current (excluding graphs)

By the numbers

What are the COVID-19 activity details by week?

Period Ending	# of Claimants*			# of Claims			Adjudicated Amount			
	All Other	Tests	Vaccine Admin.	All Other	Tests	Vaccine Admin.	All Other	Tests	Vaccine Admin.	Total
Mar. 2020	11	1	0	11	1	0	\$1,437	\$51	\$0	\$1,488
Apr. 2020	61	104	0	102	105	0	\$52,163	\$5,790	\$0	\$57,952
May 2020	280	304	0	351	314	0	\$274,350	\$27,808	\$0	\$302,158
June 2020	326	1,165	0	379	1,199	0	\$93,748	\$84,831	\$0	\$178,578
July 2020	679	1,212	0	761	1,248	0	\$293,657	\$107,468	\$0	\$401,125
Aug. 2020	970	2,463	0	1,049	2,597	0	\$320,250	\$244,535	\$0	\$564,786
Sept. 2020	721	1,755	0	760	1,894	0	\$131,646	\$169,047	\$0	\$300,693
Oct. 2020	764	2,032	0	825	2,275	0	\$128,672	\$191,569	\$0	\$320,241
Nov. 2020	1,571	4,060	0	1,707	4,467	0	\$320,687	\$379,557	\$0	\$700,243
Dec. 2020	2,228	3,804	3	2,394	4,282	3	\$380,794	\$368,705	\$75	\$749,574
Jan. 2021	3,128	4,989	316	3,423	5,611	317	\$816,977	\$459,501	\$10,589	\$1,287,068
Feb. 2021	3,794	4,364	2,349	4,216	5,083	2,384	\$914,142	\$394,497	\$79,716	\$1,388,355
Mar. 2021	2,326	3,902	6,664	2,541	4,479	6,778	\$662,029	\$368,361	\$199,393	\$1,229,783
Apr. 2021	2,464	3,699	5,551	2,771	4,149	5,700	\$620,973	\$333,558	\$219,699	\$1,174,231
May. 2021	2,087	3,889	3,260	2,302	4,353	3,334	\$555,427	\$381,335	\$134,658	\$1,071,420
06/06/21	389	652	395	427	715	420	\$57,195	\$63,574	\$14,251	\$135,021
06/13/21	258	540	533	282	600	543	\$58,841	\$49,368	\$21,738	\$129,947
06/20/21	267	538	438	280	601	452	\$56,489	\$53,327	\$18,886	\$128,701
06/27/21	251	552	467	267	675	488	\$27,189	\$68,239	\$20,595	\$116,024
07/04/21	176	609	394	185	659	415	\$25,084	\$60,418	\$14,878	\$100,380
07/11/21	195	390	282	217	451	319	\$37,355	\$34,529	\$9,017	\$80,901
07/18/21	199	465	211	214	521	217	\$30,242	\$42,910	\$8,293	\$81,445
07/25/21	204	419	203	213	469	208	\$22,286	\$42,002	\$8,552	\$72,840
08/01/21	270	503	167	288	591	171	\$39,503	\$43,211	\$6,886	\$89,600
08/08/21	359	677	185	378	780	194	\$56,389	\$61,784	\$7,575	\$125,748
08/15/21	380	776	234	400	889	247	\$56,272	\$70,657	\$9,631	\$136,560
08/22/21	508	834	198	543	923	204	\$139,313	\$70,329	\$8,430	\$218,071
08/29/21	395	754	224	438	858	263	\$64,489	\$73,733	\$10,230	\$148,451
09/05/21	443	794	246	481	894	252	\$71,216	\$71,308	\$10,118	\$152,641
09/12/21	312	635	176	332	708	185	\$47,201	\$58,723	\$7,647	\$113,570
09/19/21	418	765	134	453	870	134	\$70,533	\$75,914	\$5,604	\$152,051
09/26/21	549	959	259	596	1,147	270	\$130,153	\$90,537	\$10,927	\$231,617
10/03/21	584	961	247	651	1,067	249	\$94,327	\$96,042	\$9,881	\$200,250
10/10/21	701	974	323	792	1,074	330	\$382,038	\$94,415	\$17,239	\$493,692
10/17/21	544	980	279	609	1,060	282	\$91,100	\$94,176	\$15,019	\$200,295
10/24/21	525	976	398	571	1,097	423	\$164,893	\$95,330	\$20,935	\$281,159
10/31/21	537	1,015	367	593	1,135	384	\$113,719	\$101,826	\$18,390	\$233,935
11/07/21	532	974	417	595	1,056	422	\$78,504	\$93,241	\$21,251	\$192,996
11/14/21	480	1,060	452	512	1,324	456	\$62,198	\$86,937	\$21,596	\$170,731
11/21/21	607	1,136	641	663	1,294	647	\$76,677	\$108,920	\$29,862	\$215,459
11/28/21	926	1,434	553	1,106	1,711	557	\$79,372	\$130,139	\$28,554	\$238,065
12/05/21	744	1,240	573	810	1,426	578	\$117,873	\$133,874	\$28,875	\$280,621
12/12/21	786	1,415	591	858	1,645	593	\$140,890	\$158,727	\$31,117	\$330,734
12/19/21	813	1,495	621	886	1,740	628	\$217,650	\$166,045	\$31,437	\$415,132
12/26/21	918	1,389	585	1,119	1,564	600	\$157,632	\$152,609	\$28,829	\$339,070
01/02/22	1,055	1,741	527	1,128	1,957	533	\$217,866	\$199,865	\$26,425	\$444,156
01/09/22	1,232	2,056	409	1,341	2,363	410	\$157,347	\$234,257	\$20,060	\$411,664
01/16/22	1,094	2,040	446	1,177	2,320	447	\$149,360	\$247,827	\$21,477	\$418,663
01/23/22	797	1,585	465	908	1,857	470	\$200,519	\$190,952	\$19,500	\$410,971
01/30/22	723	1,459	322	846	1,691	328	\$174,549	\$176,080	\$14,467	\$365,096
02/06/22	683	1,486	193	772	1,918	205	\$238,776	\$207,489	\$9,077	\$455,343
Total				45,523	83,707	32,040	\$9,471,992	\$7,315,928	\$1,251,378	\$18,039,297

* Claimants are unique to the individual week, so the same individual may be counted in multiple weeks

SCHOOL HEALTH INSURANCE FUND - 93807101

COVID-19 Weekly Update

Group Number(s): 141839,737392,737419,169659,169498



Actual paid claim amounts may vary from the report once claims are finalized.
The information in this report is intended to provide weekly insights as a leading indicator based on the information available, which may differ from final results.
Data in this report is from March 1, 2020 to current (excluding graphs)

Appendix:

Alerts for the top 50 counties with high new cases rates in which you have membership

State, County	County population	Your members	Avg. daily new cases per 100K	Risk Level
AZ, Cochise	125,922	1	177.7	High Risk
SC, Horry	354,081	2	151.0	High Risk
SC, Oconee	79,546	1	147.6	High Risk
RI, Providence	638,931	1	147.4	High Risk
TX, El Paso	839,238	1	131.9	High Risk
FL, St. Johns	264,672	1	131.1	High Risk
AZ, Maricopa	4,485,414	1	126.7	High Risk
CA, Santa Clara	1,927,852	1	126.5	High Risk
VA, Lynchburg city	82,168	1	117.0	High Risk
NC, Moore	100,880	2	115.1	High Risk
NC, Mecklenburg	1,110,356	5	107.7	High Risk
CO, El Paso	720,403	1	104.7	High Risk
FL, Polk	724,777	1	104.7	High Risk
FL, Manatee	403,253	1	102.5	High Risk
SC, Berkeley	227,907	1	101.4	High Risk
VA, Orange	37,051	1	89.1	High Risk
FL, Miami-Dade	2,716,940	1	85.2	High Risk
TX, Collin	1,034,730	1	83.5	High Risk
TX, Fort Bend	811,688	1	80.7	High Risk
DE, Kent	180,786	1	71.3	High Risk
PA, Lackawanna	209,674	3	71.1	High Risk
CO, Summit	31,011	1	67.7	High Risk
FL, Collier	384,902	1	65.7	High Risk
NJ, Cumberland	149,527	249	65.4	High Risk
VA, Arlington	236,842	2	64.7	High Risk
MA, Suffolk	803,907	1	64.1	High Risk
CT, Windham	116,782	1	62.5	High Risk
PA, Luzerne	317,417	1	57.7	High Risk
PA, Wyoming	26,794	4	57.6	High Risk
DE, Sussex	234,225	1	56.8	High Risk
PA, Lancaster	545,724	3	53.3	High Risk
NJ, Gloucester	291,636	5,827	50.3	High Risk
DE, New Castle	558,753	36	49.8	High Risk
NJ, Burlington	445,349	10,882	49.5	High Risk
PA, Carbon	64,182	5	49.4	High Risk
NJ, Salem	62,385	725	47.9	High Risk
PA, Wayne	51,361	1	47.0	High Risk
PA, Northampton	305,285	438	46.9	High Risk
NY, Orange	384,940	11	45.8	High Risk
NJ, Atlantic	263,670	364	45.2	High Risk
PA, Monroe	170,271	55	45.2	High Risk
PA, Pike	55,809	37	44.8	High Risk
PA, Berks	421,164	7	43.8	High Risk
NY, Ulster	177,573	3	43.7	High Risk
NJ, Camden	506,471	6,711	43.3	High Risk
NJ, Cape May	92,039	78	42.7	High Risk
NJ, Ocean	607,186	1,148	42.5	High Risk
OH, Franklin	1,316,756	1	42.3	High Risk
CT, New Haven	854,757	1	42.3	High Risk
PA, Bucks	628,270	548	40.5	High Risk

County Alerts

This table shows the rate of average daily new cases per 100,000 individuals by county. These rates are reflective of the overall general population of the county, not of your specific membership in that county. We are providing this information to inform you which counties you have membership in that are experiencing a high incidence rate of new cases.

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

The county information is for your top 50 counties in which you have membership that have the highest average daily new cases over the past seven days. Average daily new cases of 25 per 100k members are denoted as high risk (red) and those with 10-24.9 are denoted as emerging risk (orange).

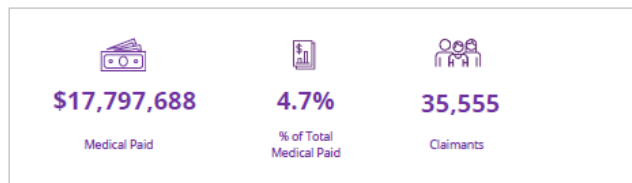
Note: There may be less than 50 counties or none at all depending upon where you have membership vs. the counties with the highest risk. Counties with less than 20 new cases will not

At a glance COVID-19 All-time experience

Time period: Jan 2020 - Dec 2021, paid through December 2021

Average Members: 32,817

Key Statistics (Medical Claims Only)



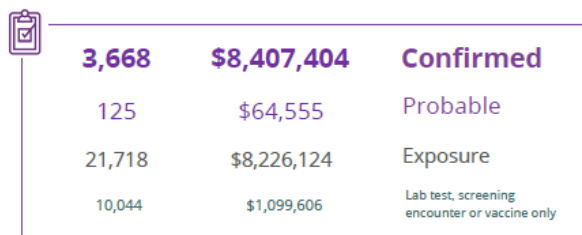
More detailed information is found on the next page to help you answer critical questions:

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

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

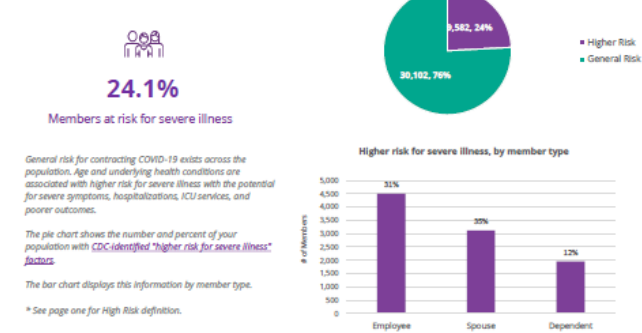
Claimant Distribution*

how your total claimants break down based on diagnosis code information



*refer to Report terms on page 1

COVID-19 population risk*



Testing



Vaccine Administration (Medical & Pharmacy)*



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

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




AmeriHealth®
ADMINISTRATORS



Schools Health Insurance 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	\$4,682,432.58	4157	\$1,126.39
DECEMBER	\$5,111,087.09	3102	\$1,647.67	DECEMBER	\$8,045,911.93	4156	\$1,935.97
JANUARY	\$4,450,033.08	3108	\$1,431.79	JANUARY	\$5,567,232.87	4179	\$1,332.19
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	\$41,528,183.31		
AVERAGE		3105	\$1,441.27	AVERAGE		4119.86	\$1,438.01

	Schools HIF
	Paid Claims 7/1/21-6/30/22
Average payment per member PMPM 7/1/21- 6/30/22	\$544.52
Number of claimants with paid claims over \$100,000 for YTD	47
Total paid on those claimants:	\$8,106,237.03
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 MTD	AHA SEPT MTD	AHA OCT MTD	AHA NOV MTD	AHA DEC MTD
1st Call Resolution	83.70%	85.21%	85.62%	83.33%	82.98%	81.26%	80.21%	81.13%	84.53%	84.60%	81.80%	84.12%
ASA	124.60	27.06	93.05	47.19	39.84	33.10	28.90	16.59	16.93	16.27	12.12	20.18
Abandonment Rate	7.40%	1.99%	6.74%	2.97%	2.34%	1.72%	1.71%	0.87%	1.04%	0.85%	0.54%	1.00%
Totals	2021 YTD											
Total Inpatient Admissions	209											
Total Inpatient Days	1,200											
Total ER visits	962											


SCHOOLS HEALTH INSURANCE FUND (SHIF) - 0001396696

Claims Incurred between 3/1/2020 and 2/15/2022 and Paid between 3/1/2020 and 2/15/2022

COVID19 Claims currently are consider to be claims with Procedure codes 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0031A , 0034A, 0041A, 0042A, 0051A, 0052A, 0053A, 0054A, 0064A, 0071A, 0072A, 0202U, 0223U, 0224U, 0225U, 0226U, 0240U, 0241U, 86328, 86408, 86409, 86413, 86769, 87426, 87428, 87635, 87636, 87637, 87811, 91300, 91301, 91303, 91304, 91305, 91306, 91307, C9803, G2023, G2024, J0248 , M0201, M0239, M0240, M0241, M0243,

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
<1	89	188	\$76,494.51	\$406.89	\$29.34
1-5	559	1624	\$468,933.23	\$288.75	\$32.81
6-18	1749	4870	\$1,061,009.62	\$217.87	\$21.80
19-25	791	2550	\$948,271.66	\$371.87	\$41.94
26-39	1517	4759	\$1,161,842.45	\$244.14	\$29.06
40-64	3094	10417	\$3,672,934.36	\$352.59	\$43.55
65+	267	843	\$685,471.61	\$813.13	\$100.58
Unknown	0	0	\$0.00	\$0.00	\$0.00

REL TO INS	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Employee	3121	10764	\$2,886,196.25	\$268.13	\$34.82
Spouse	1663	5222	\$2,332,880.07	\$446.74	\$48.19
Dependent	3039	9265	\$2,855,881.12	\$308.24	\$32.45

GENDER	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
Female	4400	14847	\$3,800,593.12	\$255.98	\$32.15
Male	3423	10404	\$4,274,364.32	\$410.84	\$42.29
Undisclosed	0	0	\$0.00	\$0.00	\$0.00

ST CD	CLAIMANT COUNT	CLAIM COUNT	NET PAY	COST PER CLAIM	COST PMPM
DE	21	49	\$4,528.81	\$92.42	\$5.66
MA	1	1	\$42.13	\$42.13	\$3.24
MD	3	4	\$255.76	\$63.94	\$3.55
NJ	7617	24694	\$7,897,355.40	\$319.81	\$37.05
NY	2	7	\$529.57	\$75.65	\$14.71
PA	179	496	\$172,245.77	\$347.27	\$33.31

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	395	575	\$786,593.17	\$1,367.99	\$3.59
Emergency Room With Observation Bed	164	184	\$564,995.10	\$3,070.63	\$2.58
Observation Bed	11	11	\$15,526.21	\$1,411.47	\$0.07
Office Physician Visit	967	1228	\$121,363.36	\$98.83	\$0.55
Other Physician Visit	108	122	\$23,580.07	\$193.28	\$0.11
Pathology (Laboratory)	6242	15341	\$1,588,522.52	\$103.55	\$7.24
Retail Clinic	12	12	\$1,165.00	\$97.08	\$0.01
Telemedicine	534	658	\$74,885.23	\$113.81	\$0.34
Urgent Care	1701	2306	\$401,743.89	\$174.22	\$1.83

Inpatient Cost and Utilization by Age Band

AGE BAND	CLAIMANT COUNT	CLAIM COUNT	ADM CNT	NET PAY	ADM PER 1000	COST PER ADM	COST PMPM	AVG LOS
<1	3	3	3	\$30,384.17	14.40	\$10,128.06	\$11.65	3.33
1-5	1	1	1	\$60,182.83	1.20	\$60,182.83	\$4.21	4.00
6-18	6	7	6	\$113,493.90	1.20	\$18,915.65	\$2.33	4.00
19-25	8	8	8	\$475,171.69	4.80	\$59,396.46	\$21.01	11.25
26-39	19	21	19	\$292,890.12	6.00	\$15,415.27	\$7.33	2.95
40-64	40	41	41	\$1,882,172.92	6.00	\$45,906.66	\$22.32	6.28
65+	10	12	10	\$470,987.06	18.00	\$47,098.71	\$69.11	4.60
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	1344	2454	\$1,416,660.73	\$577.29	\$6.46
KENNEDY UNIVERSITY HOSPITAL GAC	439	632	\$869,236.78	\$1,375.37	\$3.96
Childrens Hospital of Philadelphia	202	293	\$574,688.41	\$1,961.39	\$2.62
Inspira Medical Center Mullica Hill	686	1173	\$543,359.20	\$463.22	\$2.48
Labcorp Raritan	3025	4717	\$448,490.65	\$95.08	\$2.05
Presbyterian Medical Center	75	107	\$351,804.79	\$3,287.90	\$1.60
Virtua-Memorial Hospital of Burlington	44	50	\$336,130.60	\$6,722.61	\$1.53
Cooper University Hospital	536	706	\$316,160.82	\$447.82	\$1.44
Thomas Jefferson University Hospital Inc	42	56	\$244,810.52	\$4,371.62	\$1.12
GENESIS LABORATORY MANAGEMENT	414	558	\$183,243.78	\$328.39	\$0.84
Capital Health System	16	18	\$165,830.41	\$9,212.80	\$0.76
Hospital of the Univ of Pennsylvania	31	48	\$151,580.83	\$3,157.93	\$0.69
Quest Diagnostics Inc	1145	1526	\$144,814.89	\$94.90	\$0.66
PROHEALTH CARE ASSOC LLP	396	548	\$100,189.59	\$182.83	\$0.46
Alfred I Dupont Institute	18	22	\$100,046.79	\$4,547.58	\$0.46
Virtua Our Lady of Lourdes Hospital	19	21	\$93,542.35	\$4,454.40	\$0.43
RIDGEWOOD DIAGNOSTIC LABORATORY LLC	76	206	\$93,328.39	\$453.05	\$0.43
FORT WALTON BEACH MEDICAL CENTER, INC.	1	1	\$89,578.22	\$89,578.22	\$0.41
Inspira Medical Center Vineland	152	256	\$88,717.70	\$346.55	\$0.40
TJUH - Methodist Hospital	4	5	\$83,945.97	\$16,789.19	\$0.38
Virtua Primary Care - Ventnor	121	257	\$78,295.97	\$304.65	\$0.36
University Medical Center of Princeton at Plainsboro	16	26	\$72,159.59	\$2,775.37	\$0.33
MD MEDICAL GROUP LLC	239	306	\$68,693.94	\$224.49	\$0.31
Inspira Health Network Urgent Care PC	194	221	\$60,073.00	\$271.82	\$0.27
Minute Clinic Dgnstc Of New Jersey L	1213	1985	\$48,308.42	\$24.34	\$0.22

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

AGE BAND	Single Dose Vaccines CLAIMANT COUNT	1st Dose Vaccine CLAIMANT COUNT	2nd Dose Vaccine CLAIMANT COUNT	NET PAY	COST PER CLAIMANT
<1	0	0	0	\$0.00	
1-5	0	0	37	\$3,143.19	\$84.95
6-18	1	279	476	\$53,939.16	\$71.35
19-25	3	140	150	\$19,041.89	\$64.99
26-39	7	381	407	\$52,556.54	\$66.11
40-64	20	935	1073	\$132,888.94	\$65.53
65+	3	65	83	\$10,122.51	\$67.04
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	7	7	\$1,300.23	\$185.75
1-5	111	140	\$25,084.87	\$225.99
6-18	362	476	\$84,967.72	\$234.72
19-25	223	322	\$52,484.78	\$235.36
26-39	352	475	\$83,423.24	\$237.00
40-64	619	821	\$142,447.26	\$230.12
65+	40	65	\$12,035.79	\$300.89
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	2	2	\$285.00	\$142.50
26-39	3	3	\$250.00	\$83.33
40-64	7	7	\$630.00	\$90.00
65+	0	0	\$0.00	\$0.00
Unknown	0	0	\$0.00	\$0.00



EXPRESS SCRIPTS®

School Health Insurance Fund

Total Component/Date of Service (Month)	202001	202002	202003	2020Q1	202004	202005	202006	2020Q2	202007	202008	202009	2020Q3	202010	202011	202112	2020Q4	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	24,494	24,440	24,458	22,735
Total Days	685,776	648,586	788,085	2,122,447	727,144	779,850	759,939	2,266,933	815,986	874,050	802,868	2,492,904	841,714	868,981	857,347	2,568,042	9,450,326
Total Patients	7,369	7,340	8,306	11,657	8,209	8,568	8,657	12,591	9,512	9,782	9,496	14,534	10,144	10,644	10,914	15,895	20,495
Total Plan Cost	\$3,000,563	\$2,586,351	\$3,452,581	\$9,039,495	\$3,133,101	\$3,066,329	\$3,204,949	\$9,404,380	\$3,669,494	\$3,722,403	\$3,418,021	\$10,809,918	\$3,785,233	\$3,593,745	\$3,844,707	\$11,223,685	40,477,478
Generic Fill Rate (GFR) - Total	84.7%	84.6%	81.9%	83.6%	81.5%	81.2%	82.3%	81.7%	84.3%	83.3%	82.8%	83.5%	79.7%	78.9%	78.0%	78.8%	81.7%
Plan Cost PMPM	\$142.99	\$122.15	\$162.31	\$142.51	\$147.54	\$144.50	\$150.73	\$147.59	\$153.29	\$155.55	\$139.92	\$149.52	\$154.88	\$146.72	\$157.31	\$152.97	148.37
% Change Plan Cost PMPM	1.5%	-5.1%	3.8%	0.4%	5.6%	10.5%	4.8%	6.9%	-4.6%	11.4%	4.8%	3.4%	5.0%	8.9%	7.3%	7.0%	4.5%
Total Specialty Plan Cost	\$1,051,820	\$887,136	\$1,345,066	\$3,284,021	\$998,752	\$1,009,174	\$1,157,417	\$3,165,343	\$1,190,143	\$1,362,459	\$1,286,261	\$3,838,862	\$1,372,699	\$1,397,072	\$1,527,947	\$4,297,718	\$14,585,944
Specialty % of Total Specialty Plan Cost	35.1%	34.3%	39.0%	36.3%	31.9%	32.9%	36.1%	33.7%	32.4%	36.6%	37.6%	35.5%	36.3%	38.9%	39.7%	38.3%	36.0%

PMPM	
Jan-December 2020	\$142.01
Jan-December 2021	\$148.37
Trend - 2021 YTD	4.5%



Dental Action Report

Brian Remlinger

Account Manager

bremlinger@deltadentalnj.com

11,051 Members were
continuously enrolled
Q4 2020 - Q3 2021

National Benchmark

Your Oral Health Score:
65/100

76th Percentile

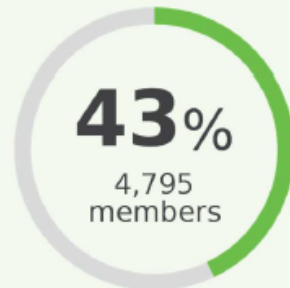
National benchmark data
comes from Healthentic's
database of over 50 million
members from all 50 states

Peer Comparison

Your peers are 29 groups
similar to your own,
nationwide:

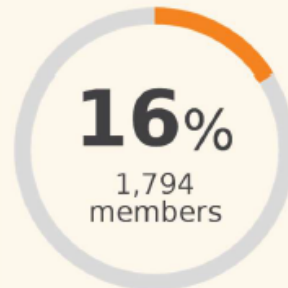
- Insurance Carriers and Related Activities
- 2500+ members

Healthy



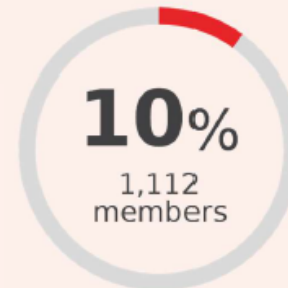
Peers 43%
same as peers
These members had
preventive care only

Moderate



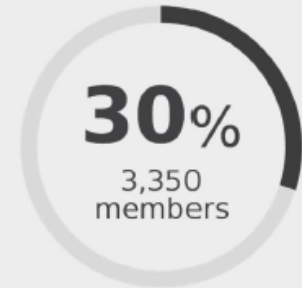
Peers 16%
same as peers
These members primarily had
preventive care and treatment

Serious



Peers 11%
9% below peers
These members had emergency
care only or extensive care

No Visit



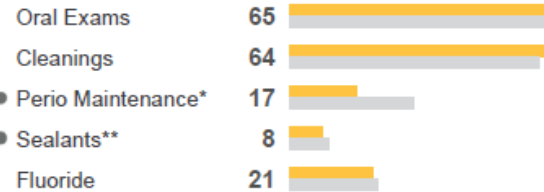
Peers 29%
3% above peers
These members had no
dental claims

Oral Health Indicators

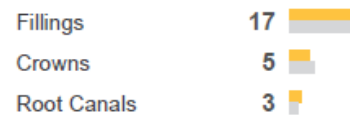
Type of Service

% of Members With Care

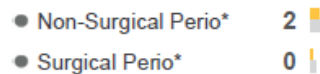
Healthy Behaviors



Tooth Decay



Gum Disease

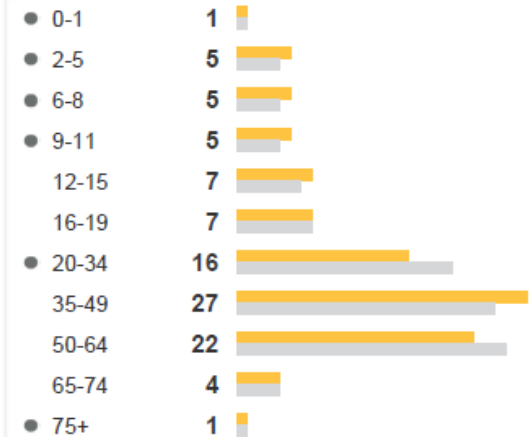


Tooth Loss



Age

% of Members



■ Your Group ■ Peers

● Indicates ≥ 20% above or below peers

*Age 20+ **Age 6-19 ***Age 50+

RESOLUTIONS

**SCHOOLS HEALTH INSURANCE FUND
CERTIFICATION OF THE AUDIT REPORT FOR
PERIOD OF JULY 1, 2020 THROUGH JUNE 30, 2021**

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

WHEREAS, the Annual Report of Audit for the budget period of July 1, 2020 through June 30, 2021 has been filed by the appointed Fund Auditor with the Secretary of the Fund as per the requirements of N.J.S.A. 40A:5-6 and N.J.S.A. 40A:10-36, and a copy has been received by each Trustee, and

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

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

General Comments and Recommendations and ;

WHEREAS, the Trustees have personally reviewed, at a minimum, the Annual Report of Audit, and specifically the sections of the Annual Audit entitled:

General Comments and Recommendations ; as evidenced by the group affidavit form of the Trustees.

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

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

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

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

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

ADOPTED: FEBRUARY 23, 2022

BY: _____
CHAIRPERSON

ATTEST: _____
SECRETARY

GROUP AFFIDAVIT FORM
CERTIFICATION OF FUND COMMISSIONERS
of the
SCHOOLS HEALTH INSURANCE FUND

We the Fund Trustees of the Schools health Insurance Fund, of full age, being duly sworn according to law, upon our oath depose and say:

- 1.)We are duly elected Trustees of the Schools health Insurance Fund
- 2.)In the performance of our duties, and pursuant to the Local Finance Board Regulation, we have familiarized ourselves with the contents of the Annual Fund Audit filed with the Secretary of the Fund pursuant to N.J.S.A. 40A:5-6 and N.J.S.A. 40A:10-36 for the period through June 30, 2020.
- 3.)We certify that we have personally reviewed and are familiar with, as a minimum, the sections of the Annual Report of Audit entitled:

GENERAL COMMENTS - RECOMMENDATIONS

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

_____ (L.S.)

Attest: Fund Secretary _____

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

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

RESOLUTION NO. 2-22

**SCHOOLS HEALTH INSURANCE FUND
INTRODUCTION OF THE 2022-2023 PROPOSED BUDGET**

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

WHEREAS, the Board of Trustees met on February 23, 2022 in Public Session to introduce the proposed budget for 2022-2023 Fund Year; and

BE IT FURTHER RESOLVED that a hearing on this 2020-2021 budget in the amount of \$292,637,916 shall be held at the Fund's regularly scheduled and advertised meeting of March 23, 2022 to be held at the Moorestown Community House at 12:00 pm. This 2022-2023 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 Trustee, Risk Manager, and Governing Body, the New Jersey Department of Banking and Insurance, and the New Jersey Department of Community Affairs.

ADOPTED: February 23, 2022

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

RESOLUTION NO. 3-22

**RESOLUTION AUTHORIZING REFUND FROM
CLOSED YEARS ACCOUNT**

WHEREAS, N.J.A.C. 11:15-2.21 provides that a FUND may seek approval from the Commissioner of Insurance for a refund of excess monies from any FUND year upon compliance with certain requirements; and

WHEREAS, the FUND has obtained a calculation from its Actuary and Executive Director as to the amount of money which is available for distribution consistent with the aforementioned regulations, and the financial integrity of the FUND; and

WHEREAS, the Board of Trustees has determined that it would be in the best interest of the FUND and its member entities to make certain refunds;

NOW, THEREFORE, BE IT RESOLVED by the Board of Trustees of the Schools Health Insurance Fund, as follows:

1. Section B of N.J.A.C. 11:15-2.21 provides that the FUND may seek approval for refunds from any claim fund which has been completed for not less than twenty-four months. Based upon this requirement, surplus monies in closed fund years are eligible for refunds at the discretion of the FUND;
2. The Board of Trustees have balanced the interests of the member school boards in obtaining the benefit of such monies as are available for refund against the need for the FUND to protect and preserve its financial integrity. It is the conclusion of the Board of Trustees that the following amount can be refunded at this time:

CLOSED YEARS - \$2,745,678

3. The Executive Director is authorized and directed to submit such documents pertaining to this refund as the regulations require to the Department of Insurance and the Department of Community Affairs.
4. Member liabilities aged more than 90 days have been reduced from the dividend allocation.
5. The FUND members have the option of taking these monies in the form of a check or as a credit on a future bill. The money can also be held in an interest bearing account established and retained by the Fund and the member can draw upon the account upon request.
6. The FUND Treasurer is authorized to prepare and execute checks for the pro-rated amount of the aforementioned refunds due to each member municipalities for the year in question, provided, however, the FUND Treasurer shall deduct any outstanding balances without regard for Fund year;

SCHOOLS HEALTH INSURANCE FUND

ADOPTED: FEBRUARY 23, 2022

BY:_____
CHAIRPERSON

ATTEST:_____
SECRETARY

RESOLUTION NO. 4-22

**SCHOOLS HEALTH INSURANCE FUND
APPOINTING A SPECIAL COMMISSIONER TO THE MUNICIPAL REINSURANCE HEALTH
INSURANCE FUND**

WHEREAS, The Schools Health insurance Fund has agreed to join the Municipal Reinsurance Health Insurance Fund; and

WHEREAS, by virtue of the conditions of membership contained in the by-laws of the fund, the Schools Health insurance Fund must appoint a Special Commissioner to the represent the Fund;

NOW THEREFORE BE IT RESOLVED, Southern Coastal Regional Employee Benefits Fund as follows:

1. That Jim Sekelsky is hereby appointed as Fund Commissioner.
2. That Beth Ann Coleman is hereby appointed as Alternate.
3. That _____ is hereby appointed as Special Commissioner

SCHOOLS HEALTH INSURANCE FUND

ADOPTED: February 23, 2022

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

**MUNICIPAL REINSURANCE HEALTH INSURANCE FUND
INDEMNITY and TRUST AGREEMENT**

THIS AGREEMENT made this 26th Day of January 2022, by and between the Municipal Reinsurance Health Insurance Fund, hereinafter referred to as the "REINSURANCE FUND", and the Schools Health Insurance Fund, hereinafter referred to as the "FUND".

WITNESSETH:

WHEREAS, several local governmental units are desirous of forming a Reinsurance claims joint insurance fund as authorized and described in N.J.S.A. 40A:10-36 et seq., and the administrative regulations promulgated pursuant thereto; and,

WHEREAS, the FUND has agreed to become a member of the REINSURANCE FUND and to share in the obligations and benefits flowing from such membership with other members of the REINSURANCE FUND in accordance with and to the extent provided for in the Bylaws of the REINSURANCE FUND, and in consideration of such obligations and benefits to be shared by the membership of the REINSURANCE FUND.

NOW, THEREFORE, be it agreed as follows:

- 1.) The FUND accepts the REINSURANCE FUND's Bylaws as approved and adopted and agrees to be bound by and to comply with each and every provision of the said Bylaws, the pertinent statutes and administrative regulations pertaining to same and as set forth in the Risk Management Plan.
- 2.) The FUND agrees to participate in the REINSURANCE FUND with respect to the types of insurance listed in the FUND's Resolution to Join.
- 3.) The FUND agrees to become a member of the REINSURANCE FUND for an initial period not to exceed three (3) years, the commencement of which shall commence effective January 1, 2022.
- 4.) The FUND certifies that it has not defaulted on any claims if self-insured and has not been cancelled for non-payment of insurance premiums for a period of at least two (2) years prior to the date hereof.
- 5.) In consideration of membership in the REINSURANCE FUND, the FUND agrees that it shall jointly and severally assume and discharge the liability of each and every member of the REINSURANCE FUND, all of whom as a condition of membership in the REINSURANCE FUND shall execute a verbatim counterpart of this agreement, and by execution hereof the full faith and credit of the FUND is pledged to the punctual payment of any sum which shall become due to the REINSURANCE FUND in accordance with the Bylaws thereof, this agreement, the REINSURANCE FUND's Risk Management Plan, or any applicable statute.
- 6.) If the REINSURANCE FUND in the enforcement of any part of this agreement shall incur necessary expense, or become obligated to pay attorney's fees and/or court costs, the FUND agrees to reimburse the REINSURANCE FUND for all such reasonable expenses, fees, and costs on demand.

- 7.) The FUND and the REINSURANCE FUND agree that the REINSURANCE FUND shall hold all monies paid by the FUND to the REINSURANCE FUND as fiduciaries for the benefit of REINSURANCE FUND claimants, all in accordance with administrative regulations.
- 8.) The REINSURANCE FUND shall establish a Trust Account entitled "Claims or Loss Retention Fund". The REINSURANCE FUND shall maintain the Trust Account in accordance with N.J.S.A. 40A:10-36 et seq., N.J.S.A. 40A:5-1, and such other regulations or statutes as may be applicable. More specifically, the Trust Account shall be utilized solely for the payment of claims, allocated claim expense, and excess insurance or reinsurance premiums for such risk or liability or as "surplus" as such term is defined by the administrative regulations.
- 9.) Each FUND who shall become a member of the REINSURANCE FUND shall be obligated to execute this agreement.

SCHOOLS HEALTH INSURANCE FUND

ADOPTED: February 23, 2022

_____ Dated: _____
Chairman

Attest:

_____ Dated: _____
Secretary

APPENDIX I

**SCHOOLS HEALTH INSURANCE FUND
OPEN MINUTES
DECEMBER 1, 2021
FORSGATE COUNTRY CLUB
12:00 PM**

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

ROLL CALL 2021-2022 BOARD OF TRUSTEES

Trustee	BOE		
Joseph Collins	Delsea Regional BOE	Chairman	Present
Beth Ann Coleman	Collingswood BOE	Secretary	Present
Lisa Giovanelli	Rancocas Valley BOE		Absent
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		Present
Jim Sekelsky	Newton BOE		Absent

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

PRESENT FUND PROFESSIONALS:

Ed OMalley
Lynsey Eddy
Anisah Coppin
Greg D’Orazio
Robert Weil
Tom Tafuri
Brooke Frapwell
Joe Auleta
Peter D’Aquila
Atilla Sabahoglu
Susan Panto
Michael Blake
Brian Reilly

Chuck Grande
Michael Zangrilli
Nick Mackres
John Ogunkanmi

MOTION TO APPROVE OPEN MINUTES OF SEPTEMBER 22 2021

Moved:	Commissioner DiGangi
Second:	Commissioner Lessard
Vote:	All in Favor, 2 abstained due to being absent (Commissioner Coleman & Commissioner Collings)

PUBLIC COMMENT - None

EXECUTIVE DIRECTORS REPORT

FINANCIAL FAST TRACK -

Account Manager Emily Koval from the Executive Director's Office stated that the Financial Fast track through September which was a higher month than usual, which we expect from this group which historically uses the benefits in the summer and paid in September.

A copy of the draft Annual Financial Audit for the period ending June 30, 2020 was included as a separate document.

Auditor, Mr. Skalkowski briefly reviewed the 2019-2020 draft audit which was distributed to the Board at the meeting. Overall, the Fund is in very good financial position. HE thanked the professionals and Board for cooperation. Ms. Koval said that the Finance Committee will need to review the final audit and ratify at the next meeting.

MOTION TO ALLOW THE FINANCE COMMITTEE TO REVIEW AND APPROVE THE FINAL AUDIT FOR STATE FILING BY 12/31/2021.

Moved:	Commissioner Coleman
Second:	Commissioner Colling

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. Ms. Koval said that the budget process will begin soon when we receive all data through the end of December.

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. Ms. Koval said that if there are new members, the Committee will review first and advise at the next meeting.

PROGRAM MANAGER'S REPORT

Contract Negotiations

Program Manager Brandon Lodics stated that the contract between Aetna and Jefferson Health have been extended through January 31, 2022. Aetna and Jefferson are cooperating well.

Garden State Health Plan- Roll Out

Mr. Lodics thanks the Risk Managers and carriers involved in the Garden State roll out. He stated that they have worked with the 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. Mr. Lodics went over what to expect and the dates of effectiveness for the Garden State Roll Out Plan shown in the agenda.

Guardian Nurses – Return on Investment

Mr. Lodics explained that 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 is a big investment for the SHIF and they look forward to seeing and sharing the results of this study.

No Surprises Act ID Card Impact

Mr. Lodics stated that Aetna's is reassessing their stance based on to the ID card reissue project. Changes to Aetna ID Cards are on hold pending further review.

He also explained that AmeriHealth will be moving forward with issuing new ID cards for the SHIF population.

Artemis Data Warehouse Reporting Follow ups:

Program Manager Lodics reviewed the reporting mentioned in the Agenda:

- 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.

Mr. Lodics also stated that Guardian Nurses in Seattle has a new nurse with a behavioral health and substance abuse background. The Artemis reporting showed that a majority of the substance abuse patients were from relapses.

GUARDIAN NURSES – Ms. Sambuco was not present.

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

CONFIRMATION OF PAYMENT – October 2021

FUND YEAR	AMOUNT
FUND YEAR 2021/2022	\$2,793,783.68
TOTAL ALL FUND YEARS	\$2,805,410.23

RESOLUTION 25-21 –November 2021 BILLS LIST

FUND YEAR	AMOUNT
FUND 2021-2022	\$1,796,688.93
TOTAL ALL FUND YEARS	\$1,806,690.53

MOTION TO APPROVE RESOLUTION 25-21:

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

FUND ATTORNEY – Fund Attorney Ken Harris reviewed the current COVID-19 booster guidelines.

AETNA – Mr. Silverstein reviewed the claims for August, September and October 2021. He reviewed the high claimant reports which showed there were 6 claimants over \$100,000 for August, 12 for September and 7 for October. He reviewed the dashboard and noted that all metrics are performing well but there are a few below target. Mr. Silverstein reviewed the COVID-19 reporting included in the agenda.

AMERIHEALTH – Ms. Strain reviewed the claim for October 2021, the pepm was \$1,693.07. She said there were 18 claimants over \$50,000 for the month of October. Mrs. Strain reviewed the COVID-19 reporting included in the agenda.

HORIZON- None.

EXPRESS SCRIPTS – Mr. Stahl stated that the trend has an increase of 3.6%. This is most likely due to the uptick in specialty medications they have been seeing. There were no major high claimants to report.

DELTA – None

OLD BUSINESS – None

NEW BUSINESS – None

PUBLIC COMMENT: None

MOTION TO ADJOURN:

MOTION:	Commissioner Coleman
SECOND:	Commissioner Lessard
VOTE:	Unanimous

MEETING ADJOURNED: 1:00 pm

NEXT MEETING: February 23, 2022
Moorestown Community House
12:00pm

Jordyn DeLorenzo, Assisting Secretary
Date Prepared: February 10, 2022

APPENDIX II

BUDGET WORKSHOP MINUTES

February 14, 2022

10:30 am

Attendees:

Joseph Collins, Fund Chair
Nicholas Bice, Committee Member
Marie Goodwin, Committee Member
Jim Sekelsky, Committee Member
Emily Koval, PERMA
Brandon Lodics, PERMA
Lane Hindman, Conner Strong & Buckelew
Crystal Bailey, Conner Strong & Buckelew
Scott Davenport, Conner Strong & Buckelew
Diane Peterson, Conner Strong & Buckelew
John Vataha, Actuarial Solutions, LLC

Program Manager Brandon Lodics started out with introductions to introduce John Vataha.

AETNA CLAIMS PROCESSING SLOW DOWN – Mr. Lodics reviewed what an IBNR is. He said there are claims that are being occurred that we are yet aware of and need to hold these liabilities until they are paid. Through the 22-23 budget development process, John discovered that there was a slow down with Aetna's payments through his normal IBNR model. Unfortunately, our IBNR that we have been accruing has been understated because we were using INBR numbers from historical Aetna payments.

Mr. Sekelsky asked why would we include time in the model. Mr. Vataha said that the actuary looks back on how claims are paid historically. For example, we expect 30 days for any given claim, but when that slows down, we have more liability at any given time. Mr. Sekelsky said standardly, the lag time should be caught up. Mr. Vataha said yes, we will eventually catch up, but have to know a month to month run out to be different and reserving accurate amount of money. We need to get to the same claim number each month, but each month is understated as the time of claim payments are complete. Mr. Vataha said this is not unique to Aetna, many providers are short staffed so the claims are not being sent to the TPA in usual time. Mr. Collins said that it is not a paid claim issue and it is not that there are more than usual claims, it is the time that it takes to get there.

Mr. Lodics said that Aetna is still meeting the Performance Guarantees, of which they are in a rolling 12 month self reported turn around time is still within the metric. It was requested that the Fund should have been notified earlier so we could have updated

our financials. Mr. Vataha said their PG is based off of when they receive the claims, and if they are receiving from the providers.

In response to Mr. Collins, Mr. Lodics said that the Fund certifies the IBNR once a year and reviewed at the budget process, if we had a quarterly IBNR reviews, this may have been caught earlier. This is not included in the scope of services but we can recommend adding this to his contract for next year. The cost is minimal and we can request a quote. Mr. Collins requested the proposal. In addition, for next year's audit, this will not be an issue.

The Commissioners agreed to request a quote for the additional quotes. Mr. Lodics said this will assist with our monthly IBNR numbers.

Financial Fast Track – Mr. Lodics said the IBNR number has been corrected on this December Financial report. He said that \$9 million is the through the first 6 months. Basically, the Fund is at a break even for the first 6 months. Prior to the change, the Fund had reserved \$31 million, but the real number is about \$40 million. In response to Mr. Sekelsky, Mr. Lodics said we had \$31 million as IBNR but the change was made in this month and will not be that number every month. Mr. Vataha said any given month can fluctuate. A negative may show this month, and there is accounting catch ups, random claims, but not assume that this indicates a poor experience going forward. Mr. Vataha said that we are not assuming that our claims are running unusually high. This is an accounting correction. Mr. Collins said that there are 6 months to finalize the fund year.

CLAIM FUNDS - Mr. Lodics went over the claims budget by line, which are all less than trend. There is no rate stabilization included in this budget. The Surplus is still very strong. The Committee may add this line, up to 2.5%. We do not see a need, though.

Reinsurance – The Fund is below trend for this line. The MRHIF specific increase will be \$500,000, which increased due to leverage trend. The Fund is offsetting trend by increasing the limit and taking more risk.

Expenses – DMO small population which is about 5%. 1.74% of the budget is operating costs, as per the RFP process. Aetna and AHA decreased their fees. Horizon is asking for a 2% increase, which is the first increase since they joined the Fund.

Mr. Lodics reviewed the expenses in more detail.

He notated that the **Guardian Nurses** added a new nurse, which reflects the increase. Guardian Nurses said that in 3 months they have seen 700 patients. They have a new platform that allows members to have real time inpatient notifications. In response to

Mr. Sekelsky, Mr. Lodics said that our contract is specific to each Fund and not spread across the entire MRHIF.

Mr. Lodics said we are working on the **assessments** by member to have prepared at the Friday agenda review meeting. In response to Mr. Collins, the savings on the Rx is primarily from the Level Care contract that was approved last year. In response to Mr. Bice, Mr. Lodics said that we have heard that the State Educator's plan is underfunded, primarily from the early retirees. We don't know what to expect, but have not heard about a reduction. Mr. Davenport said that the State January rates were slightly decreased and retirees were increased slightly. The premium holiday was for February bills. The State does not release much financial information to pin point how their numbers have been derived.

Dividend – Mr. Lodics reviewed the dividend availability. Two scenarios were presented. Mr. Collins and Mr. Sekelsky recommended the 1/3 available. Ms. Goodwin and Mr. Bice agreed. Mr. Bice said that there are concerns about having too much cash, but with the IBNR discussion it makes sense to be conservative.

Committee requested that we base the dividend availability based on closed year, not full surplus. Mr. Lodics said that we can clarify the availability illustration to include closed year only. Mr. Collins said we can address this later in the year, as well as a second dividend.

Meeting Adjourned

Minutes Prepared by:

Emily Koval, Account Manager

2/14/2022