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AGENDA & REPORTS

FEBRUARY 28, 2024

12:00 PM

Moorestown Community House

SCHOOLS HEALTH INSURANCE FUND
MEETING: FEBRUARY 28, 2024
Moorestown Community House
12:00 PM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ BY CHAIRMAN

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 Star Ledger, Courier Post and the Times of Trenton 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 2023-2024 BOARD OF TRUSTEES

Officers

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

Board of Trustees

Lisa Giovanelli, Rancocas Valley BOE
Christopher Lessard, Frankford Twp BOE
Evon DiGangi, Medford Twp BOE
Nicholas Bice, Burlington Twp BOE
Jason Schimpf, Kingsway Regional School District
James Sekelsky, Newton BOE
Helen Haley, Voorhees Township BOE
John Bilodeau, Gloucester Twp BOE
Fran Adler, Clayton BOE
Katie Blew, North Hunterdon-Voorhees Regional HS
Derek Jess, Summit BOE

OPEN MINUTES: November 29, 2023 (Appendix I)

PUBLIC COMMENT: For Agenda Items Only

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

EXECUTIVE DIRECTOR (PERMA)

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PROGRAM MANAGER- (Conner Strong & Buckelew)	
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GUARDIAN NURSES - (Guardian Nurses – Andrea Spektor)	
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TREASURER – (Verrill & Verrill)	
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ATTORNEY – (J. Kenneth Harris.)	
Monthly Report	
NETWORK & THIRD PARTY ADMINISTRATOR – (Aetna – Jason Silverstein)	
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Monthly Report	
PRESCRIPTION ADMINISTRATOR – (Express Scripts – Charles Yuk)	
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DENTAL ADMINISTRATOR – (Delta Dental)	
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CONSENT AGENDA	
Resolution 1-24: 2024-2025 Budget Introduction	Page 52
Resolution 2-24: 2022-2023 Fund Year Audit	Page 53
Resolution 3-24: Joining the HIF Cooperative Pricing System	Page 56
Resolution 4-24: December 2023, January, and February 2024 Bills List	Page 58
OLD BUSINESS	
NEW BUSINESS	
PUBLIC COMMENT	
RESOLUTION - EXECUTIVE SESSION FOR CERTAIN SPECIFIED PURPOSES	
PERSONNEL - CLAIMS – LITIGATION	
MEETING ADJOURNED	

**SCHOOLS HEALTH INSURANCE FUND
EXECUTIVE DIRECTOR'S REPORT
FEBRUARY 28, 2024**

FINANCE & CONTRACTS COMMITTEE

PRO FORMA REPORTS

Fast Track Financial Reports:

- December 31, 2023

2024-2025 BUDGET INTRODUCTION

Last week, the Finance Committee met and is recommending the introduction of the attached budget. Based on performance of the 2 populations, the proposed budget has different increases for the Educators Health Plan/Garden State Plan and all others (medical and prescription).

The draft assessments and rate reports were distributed to all brokers prior to the meeting and are subject to change prior to adoption on March 28.

Assessments vary based on:

- 1) Lines of coverage in the Fund
- 2) Loss ratio adjustments of up to +/- 2.5%
- 3) Enrollment distribution in EHP/GSP vs. All Others

Attachments were included with the agenda:

- 1) 2024/2025 Proposed Budget Overview Presentation (PowerPoint)
- 2) 2024/2025 Proposed Budget
- 3) Entity Assessments

Overall Budget: +7.07%

Assessment by line of coverage:

Schools Health Insurance Fund 2024/2025 Proposed Renewal	
Medical	EHP/GSP +5.8%
	All Others +8%
	SHIF Composite: 6.75%

Prescription	EHP/GSP +15.6% All Others +18% SHIF Composite 17%
Dental PPO	Flat/No Change
Dental DMO	+8% Estimate
2024/2025 SHIF Renewal Statistics	
Average Renewal for entity with Medical	6.37%
Average renewal for entity with Medical and Rx	7.72%

MOTION: *Motion to approve Resolution 1-24 introducing the 2024-2025 Schools Health Insurance Fund budget in the amount of \$586,572,422 as per the recommendation of the Finance Committee and hold a public hearing of March 28, 2024 at the Moorestown Community House at 12:00pm.*

2022-2023 SHIF AUDIT

The Fund provided the Finance Committee authorization to approve and finalize the 2022-2023 Fund Audit.

Resolution 2-24 approves ratifies this approval and a certification is included for each Committee Member to sign.

MOTION: *Motion to approve Resolution 2-24 approving the final 2022-2023 Fund Year Audit as per the recommendation of the Finance Committee.*

DIVIDEND DISCUSSION

The Finance Committee discussed the potential of a dividend. The decision was to wait for the completion of the 2023/2024 plan year to evaluate at that time. Dividend discussions will be resurfaced in late summer/early fall 2024.

Many of our members continue to retain past dividends on the Fund books – a listing of these funds through 12/31/23 is included on page 12. The Retained Dividend Request form is included in the appendix.

COOPERATIVE PRICING SYSTEM – SNJREBF LEAD AGENT

In 2023, the MRHIF and its affiliates sought approval from the NJ Office of the Comptroller to issue an RFP for TPA Services for the local Funds. Approval was not given, as the Comptroller's office felt that MRHIF did not have the authority to procure a claims agent being utilized by the local Funds.

To secure TPA services for PY 2024, the local Funds each performed a 1-year contract for TPA services in the hopes that group purchasing would be permitted for a longer contract starting in 2025.

We have reviewed with the MRHIF QPA and Attorney who agree that the Funds may enter into a Cooperative Pricing Agreement with a lead agent. The SNJREBF will be the lead agent as they currently have existing contracts with both HIF TPAs and Medicare Advantage providers. We met with the SNJREBF Contracts committee who was supportive of the idea and comfortable moving forward as the lead agent.

The concept of the HIF Cooperative Pricing System was presented to the MRHIF Commissioners by the MRHIF Attorney and received full support.

Included in your agendas is a memo outlining the recommendation from the MRHIF Attorney to the SHIF Contracts Committee, who is in support of the SHIF joining the Pricing unit (formed by SNJREBF and BMED).

MOTION: *To pass resolution 3-24, which approve the Schools Health Insurance Funds joining the Health Insurance Cooperative Pricing System.*

OPERATIONS & NOMINATIONS COMMITTEE

FEBRUARY MRHIF MEETING

The MRHIF had their reorganization meeting on February 15, 2024. Commissioner Kunze was present to represent the Fund.

Below are some of the key highlights:

1. The Fund Attorney provided an overview of the **Cooperative Pricing System Initiative**.
2. Approval was granted for the Fund Attorney to manage the **Cooperative Pricing System filing**.
3. Approval to go out to **RFP for a Data Warehouse system** was approved.
4. Approval to go out to **RFP for Reinsurer** for multi-year contract was approved.

NEW MEMBER OPPORTUNITIES

The Fund continues to see multiple applications for membership for July 1, 2024. We will reach out to the Ops Committee regarding new members.

INDEMNITY AND TRUST AGREEMENTS

A list of member's Fund agreements that have expired or are expiring at the end of June are on page 14. Please reach out to your broker or Jordyn Robinson (DeLorenzo) for the Resolution to renew on your next local meeting.

CLAIMS & WELLNESS

WELLNESS

The Wellness Committee is recommending the release of two Wellness RFPs for the 24-25 Wellness Vendors and Wellness Coordinator. Although, both RFPs were released last year, the Committee would like to seek additional vendors for the wellness grants. The Coordinator responses were rejected last year - additional, more specific services were included for 24-25.

A Wellness Committee meeting will need to be scheduled to discuss design and options for next year.

2024 MEL, MR HIF & NJCE JIF EDUCATIONAL SEMINAR:

The 14th annual seminar will be conducted virtually on 2 half-day sessions: Friday April 19th and Friday April 26th from 9AM to 12PM.

The seminar qualifies for Continuing Educational Credits including CFO/CMFO, Public Works, Clerks, Insurance Producers and Purchasing Agents. There is no fee for employees, insurance producers, as well as personnel who work for services companies associated with the Municipal Excess Liability Joint Insurance Fund (MEL JIF), Municipal Reinsurance Health Insurance Fund (MR HIF) and New Jersey Counties Excess Joint Insurance Fund (NJCE JIF). We are in the process of preparing to distribute this notice to all members and risk managers.

SCHOOLS HEALTH INSURANCE FUND

FINANCIAL FAST TRACK REPORT

AS OF December 31, 2023

	THIS MONTH	YTD CHANGE	PRIOR YEAR END	FUND BALANCE
1. UNDERWRITING INCOME	45,257,240	269,852,317	2,172,564,694	2,442,417,011
2. CLAIM EXPENSES				
Paid Claims	38,650,385	248,212,893	1,821,747,778	2,069,960,671
IBNR	294,244	9,965,312	41,451,180	51,416,492
Less Specific Excess	223,210	(4,296,048)	(23,433,928)	(27,729,976)
Less Aggregate Excess	-	-	-	-
TOTAL CLAIMS	39,167,839	253,882,157	1,839,765,030	2,093,647,187
3. EXPENSES				
MA & HMO Premiums	9,297	53,809	679,156	732,965
Excess Premiums	930,372	5,541,311	55,558,402	61,099,713
Administrative	2,800,635	17,964,195	156,003,200	173,967,395
TOTAL EXPENSES	3,740,303	23,559,316	212,240,758	235,800,074
4. UNDERWRITING PROFIT/(LOSS) (1-2-3)	2,349,097	(7,589,156)	120,558,906	112,969,750
5. INVESTMENT INCOME	1,402,061	3,925,041	12,224,704	16,149,745
6. DIVIDEND INCOME	0	1,263,651	8,196,545	9,460,196
7. STATUTORY PROFIT/(LOSS) (4+5+6)	3,751,159	(2,400,464)	140,980,155	138,579,691
8. DIVIDEND	0	2,100	52,465,509	52,467,609
9. TRANSFERRED SURPLUS			28,079,045	28,079,045
10. STATUTORY SURPLUS (7-8)	3,751,159	(2,402,564)	116,593,691	114,191,127

SURPLUS (DEFICITS) BY FUND YEAR

Closed	Surplus	880,719	2,071,208	112,350,065	114,421,273
	Cash	1,090,064	2,774,888	135,841,070	138,615,958
2022/2023	Surplus	52,113	2,395,156	4,243,626	6,638,782
	Cash	(465,159)	(21,253,262)	29,476,883	8,223,621
2023/2024	Surplus	2,818,327	(6,868,928)		(6,868,928)
	Cash	16,550,136	52,567,624		52,567,624
TOTAL SURPLUS (DEFICITS)		3,751,159	(2,402,564)	116,593,691	114,191,127
TOTAL CASH		17,175,042	34,089,250	165,317,953	199,407,203

CLAIM ANALYSIS BY FUND YEAR

TOTAL CLOSED YEAR CLAIMS	89,305	2,134,344	1,412,325,892	1,414,460,236
FUND YEAR 2022/2023				
Paid Claims	506,945	41,652,173	387,852,703	429,504,876
IBNR	(725,396)	(39,067,738)	41,451,180	2,383,442
Less Specific Excess	467,606	(4,373,937)	(1,864,745)	(6,238,682)
Less Aggregate Excess	0	0	0	0
TOTAL	249,156	(1,789,502)	427,439,138	425,649,636
FUND YEAR 2023/2024				
Paid Claims	38,054,552	204,749,077		204,749,077
IBNR	1,019,640	49,033,050		49,033,050
Less Specific Excess	(244,813)	(244,813)		(244,813)
Less Aggregate Excess	0	0		0
TOTAL	38,829,379	253,537,314	0	253,537,314
COMBINED TOTAL CLAIMS	39,167,839	253,882,157	1,839,765,030	2,093,647,187

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, 2023

BY FUND YEAR

	SHIF 2023/2024	SHIF 2022/2023	CLOSED YEAR	FUND BALANCE
ASSETS				
Cash & Cash Equivalents	52,567,624	8,223,621	138,615,958	199,407,203
Assessments Receivable (Prepaid)	(11,070,429)	11,227	-	(11,059,202)
Interest Receivable	-	-	4	4
Specific Excess Receivable	244,813	4,449,090	-	4,693,903
Aggregate Excess Receivable	-	-	-	-
Dividend Receivable	-	-	-	-
Deferred Assessment Receivable	-	-	407,249	407,249
Prepaid Admin Fees	-	-	-	-
Other Assets	5,225,726	-	-	5,225,726
Total Assets	46,967,734	12,683,939	139,023,210	198,674,883
LIABILITIES				
Accounts Payable	-	-	-	-
IBNR Reserve	49,033,050	2,383,442	-	51,416,492
A4 Retiree Surcharge	4,480,372	3,638,519	-	8,118,891
Dividends Payable	-	-	14,972	14,972
Retained Dividends	-	-	24,586,964	24,586,964
Accrued/Other Liabilities	323,240	23,196	-	346,436
Total Liabilities	53,836,662	6,045,157	24,601,936	84,483,756
EQUITY				
Surplus / (Deficit)	(6,868,928)	6,638,782	114,421,274	114,191,128
Total Equity	(6,868,928)	6,638,782	114,421,274	114,191,128
Total Liabilities & Equity	46,967,734	12,683,939	139,023,210	198,674,883
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

SCHOOLS HEALTH INSURANCE FUND RATIOS								
	FY 2022-23	2023-2024						
INDICES	YEAR END	JUL	AUG	SEP	OCT	NOV	DEC	JAN
Cash Position	\$ 165,317,953	\$ 147,375,224	\$ 152,629,528	\$ 167,142,183	\$ 177,625,366	\$ 182,232,161	\$ 199,407,203	
IBNR	\$ 41,451,180	\$ 43,169,501	\$ 46,387,192	\$ 49,229,417	\$ 50,674,848	\$ 51,122,248	\$ 51,416,492	
Assets	\$ 204,511,382	\$ 195,045,832	\$ 189,893,508	\$ 191,068,296	\$ 196,521,591	\$ 193,900,710	\$ 198,674,883	
Liabilities	\$ 71,271,273	\$ 72,387,896	\$ 76,382,270	\$ 80,092,240	\$ 82,117,552	\$ 83,460,741	\$ 84,483,756	
Surplus	\$ 133,240,108	\$ 122,657,935	\$ 113,511,238	\$ 110,976,056	\$ 114,404,040	\$ 110,439,969	\$ 114,191,128	
Claims Paid -- Month	\$ 44,101,666	\$ 36,459,463	\$ 46,812,905	\$ 41,333,682	\$ 39,746,959	\$ 45,209,499	\$ 38,650,385	
Claims Budget -- Month	\$ 36,451,199	\$ 40,523,436	\$ 40,481,412	\$ 41,341,644	\$ 41,291,963	\$ 41,320,006	\$ 41,364,758	
Claims Paid -- YTD	\$ 422,738,135	\$ 36,459,463	\$ 83,272,368	\$ 124,606,050	\$ 164,353,009	\$ 209,562,508	\$ 248,212,893	
Claims Budget -- YTD	\$ 430,493,864	\$ 40,523,436	\$ 81,004,848	\$ 122,346,492	\$ 163,638,455	\$ 204,958,461	\$ 246,323,219	
RATIOS								
Cash Position to Claims Paid	3.75	4.04	3.26	4.04	4.47	4.03	5.16	
Claims Paid to Claims Budget -- Month	1.21	0.90	1.16	1	0.96	1.09	0.93	
Claims Paid to Claims Budget -- YTD	0.98	0.90	1.03	1.02	1	1.02	1.01	
Cash Position to IBNR	3.99	3.41	3.29	3.40	3.51	3.56	3.88	
Assets to Liabilities	2.87	2.69	2.49	2.39	2.39	2.32	2.35	
Surplus as Months of Claims	3.66	3.03	2.8	2.68	2.77	2.67	2.76	
IBNR to Claims Budget -- Month	1.14	1.07	1.15	1.19	1.23	1.24	1.24	

Schools Health Insurance Fund						
2023/2024 Budget Status Report						
as of December 31, 2023						
	Actual	Annualized	Certified	Actual	\$ Variance	% Variance
Expected Losses	Budget	Budget	as of 7/1/23	Expensed		
Medical Claims	224,018,645	451,052,300	416,037,888	230,530,397	(6,511,752)	-3%
Prescription Claims	19,726,458	39,495,995	38,558,971	20,706,278	(979,820)	-5%
Dental Claims	2,578,116	5,165,617	4,743,180	2,300,639	277,477	11%
Subtotal Claims	246,323,219	495,713,912	459,340,039	253,537,314	(7,214,095)	-3%
Rate Stabilization Reserve	210,729	421,457	421,457	0	210,729	0%
DMO Premiums	42,080	85,871	99,666	53,809	(11,729)	-28%
Reinsurance						
Specific	5,542,551	11,569,401	10,355,275	5,541,311	1,240	0%
Total Loss Fund	252,118,579	507,790,641	470,216,436	259,132,435	(7,013,856)	-3%
Expenses						
Legal	19,369	38,738	38,738	19,369	(0)	0%
Treasurer	13,478	26,957	26,957	13,479	(0)	0%
Administrator	1,209,438	2,440,496	2,260,376	1,209,329	108	0%
Program Manager	3,192,557	6,439,555	6,043,437	3,222,430	(29,873)	-1%
Local Entity Risk Management	3,474,001	7,059,192	6,686,168	3,474,001	-	0%
TPA - Med Aetna	3,647,119	7,367,777	6,718,958	3,647,549	3,559	0%
Program Manager - Guardian Nurses	764,758	1,543,694	1,428,815	671,867	92,891	12%
TPA - Med AmeriHealth Admin	823,909	1,663,212	1,647,265	822,627	1,282	0%
TPA - Med Horizon	8,603	16,700	19,567	8,772	(169)	-2%
TPA - Vision	3,989	7,914	8,594	Included above in Med Aetna		
TPA - Dental	123,727	248,364	232,051	124,204	(477)	0%
Actuary	18,555	37,110	37,110	17,866	689	4%
Auditor	10,300	20,600	20,600	10,300	(0)	0%
Subtotal Expenses	13,309,804	26,910,308	25,168,635	13,241,794	68,010	1%
Misc/Contingenct Expenses	28,445	56,889	56,889	9,417	19,027	67%
Data Analysis System	0	0	0	63,994	(63,994)	#DIV/0!
Wellness Program	330,116	666,352	616,764	293,184	36,932	11%
Affordable Care Act Taxes	81,564	164,648	152,349	81,564	0	0%
A4 Retiree Surcharge	4,480,372	9,021,046	8,320,758	4,480,372	-	0%
Plan Documents	15,000	30,000	30,000	15,000	-	0%
Total Expenses	18,245,301	36,849,244	34,345,395	18,185,325	59,976	0%
Total Budget	270,363,880	544,639,885	504,561,831	277,317,760	(6,953,880)	-3%

REGULATORY

SCHOOLS HEALTH INSURANCE FUND

YEAR: 2023/2024

<u>Monthly Items</u>	<u>Filing Status</u>
Budget	Filed
Assessments	Filed
Actuarial Certification	Filed
Reinsurance Policies	Filed
Fund Commissioners	Filed
Fund Officers	Filed
Renewal Resolutions	Filed
Indemnity and Trust	Filed
New Members	Filed
Withdrawals	N/A
Risk Management Plan and By Laws	Filed
Cash Management Plan	Filed
Unaudited Financials	Q2 2023 filed
Annual Audit	2022/2023 to be filed
Budget Changes	N/A
Transfers	N/A
Additional Assessments	N/A
Professional Changes	N/A
Officer Changes	N/A
RMP Changes	N/A
Bylaw Amendments	N/A
Contracts	Filed
Benefit Changes	N/A

RETAINED DIVIDENDS AS OF DECEMBER 31, 2023

Member	Retained Dividend
ALEXANDRIA TOWNSHIP BOE	92,450.52
BASS RIVER TOWNSHIP BOE	1,720.53
BELLMAR PUBLIC SCHOOL DISTRICT	28,364.05
BERLIN BOROUGH BOE	320,623.21
BLACK HORSE PIKE REGIONAL BOE	1,554,772.70
BLAIRSTOWN BOE	69,619.98
BURLINGTON TOWNSHIP BOE	222,413.63
BYRAM TOWNSHIP BOE	384,538.42
CALIFON BOE	5,460.85
CHESTERFIELD BOE	27,982.15
CINNAMINSON TOWNSHIP BOE	1,906,176.49
CITY OF BURLINGTON BOE	907,462.59
CLAYTON BOE	140,156.22
CLAYTON BOE	134,115.86
DELRAN TOWNSHIP PUBLIC SCHOOLS	649,682.45
DELSEA REGIONAL BOE	1,454,953.34
DEPTFORD TOWNSHIP BOE	172,697.05
EASTERN CAMDEN COUNTY SCHOOL DISTRICT	2,232.39
EATONTOWN BOE	231,673.29
EIRC	188,850.90
EVESHAM TOWNSHIP BOE	381,862.29
EWING TOWNSHIP BOE	532,922.26
FLORENCE TOWNSHIP BOE	179,603.72
FOUNDATION ACADEMY CHARTER SCHOOL	3,795.35
FRANKFORD TOWNSHIP BOE	577,233.76
FREDON TOWNSHIP BOE	21,420.78
FRELINGHUYSEN TOWNSHIP BOE	18,350.10
GATEWAY REGIONAL BOE	518,922.65
GLASSBORO BOE	279,106.43
GLEN RIDGE PUBLIC SCHOOLS	432.35
GLOUCESTER CITY BOE	10,000.56
HAINESPORT TOWNSHIP BOE	28,869.45
HARDYSTON TOWNSHIP BOE	458,066.91
HARRISON TOWNSHIP BOE	133,560.45
HIGH POINT REGIONAL BOE	57,514.61
HOPE TOWNSHIP SCHOOL DISTRICT	21,041.25
JAMESBURG BOE	102,584.91
LEAP ACADEMY UNIVERSITY CHARTER SCHOOL	96,794.34
LEBANON TOWNSHIP BOE	345,222.24
LENAPE REGIONAL HIGH SCHOOL	33,391.19
LENAPE VALLEY REGIONAL BOE	153,215.23
LOGAN TOWNSHIP BOE	203,292.97
LOWER ALLOWAYS CREEK BOE	87,042.85
LUMBERTON TOWNSHIP BOE	58,598.87
MANSFIELD TOWNSHIP BOE	56,384.78
MANTUA TOWNSHIP BOE	1,089.73
MAPLE SHADE TOWNSHIP BOE	9,995.71
MEDFORD LAKES BOE	362,092.23
MEDFORD TOWNSHIP BOE	1,070,827.05
MENDHAM TOWNSHIP BOE	2,195.56

MONROE BOE	303.71
MOORESTOWN TOWNSHIP PUBLIC SCHOOLS	2,458,995.12
MT. HOLLY TOWNSHIP BOE	756,737.15
MT. LAUREL TOWNSHIP SCHOOLS	2,445,995.70
NEWTON BOE	3,927.30
NORTHERN BURLINGTON COUNTY REGIONAL SCHOOL DISTRICT	213,713.93
OGDENSBURG BOROUGH SCHOOL DSTRC.	111,173.55
OXFORD CENTRAL SCHOOL	542.58
PAULSBORO BOE	42,330.73
PAULSBORO PUBLIC SCHOOLS	107,025.16
PINELANDS REGIONAL SCHOOL DISTRICT	11,880.97
POHATCONG TOWNSHIP BOE	14,396.50
RAHWAY BOE	115,479.62
RAMAPO INDIAN HILLS REGIONAL HIGH SCHOOL	1,802.35
RANCOCAS VALLEY REGIONAL BOE	623,600.27
RIVERSIDE TOWNSHIP BOE	1,034,081.90
ROBBINSVILLE BOE	4,867.16
SANDYSTON-WALPACK CONSOLIDATED SCHOOL DISTRICT	6,035.40
SCHOOL DISTRICT OF THE CHATHAMS	343.32
SHAMONG TOWNSHIP BOE	584.94
SOUTH HARRISON BOE	44,951.87
SOUTHAMPTON TOWNSHIP BOE	491,559.41
SPARTA BOE	231.64
STILLWATER TOWNSHIP BOE	48,951.01
SWEDESBORO-WOOLWICH BOE	356,349.42
TABERNACLE BOE	429,358.60
TOWNSHIP OF FRANKLIN PUBLIC SCHOOLS(GC)	88,768.32
UPPER PITTSBORO BOE	149,184.30
VOORHEES TOWNSHIP BOE	238,540.02
WASHINGTON BOROUGH BOE	57,718.75
WATCHUNG HILLS REGIONAL HIGH SCHOOL	210,857.09
WEST DEPTFORD BOE	1,876.81
WEST MORRIS REGIONAL HIGH SCHOOL	5,381.94
WHITE TOWNSHIP	40,673.40
WOODBURY HEIGHTS BOE	157,591.15
WOODLAND TWP BOE	6,273.93
WOODSTOWN-PILESGROVE BOE	3,501.67

Indemnity and Trust Agreement Compliance Listing

MEMBER	I&T END DATE
Sandyston-Walpack Consolidated School District	12/31/2021
Robbinsville BOE	7/1/2022
Burlington City BOE	6/30/2023
Califon BOE	6/30/2023
Eatontown BOE	6/30/2023
Evesham Twp BOE	6/30/2023
Foundations Academy	6/30/2023
Glen Ridge Public Schools	6/30/2023
Gloucester County Vo Tech	6/30/2023
Gloucester SSSD	6/30/2023
Mendham Borough School District	6/30/2023
Stillwater Township BOE	6/30/2023
Woodbury City BOE	6/30/2023
Gloucester City School District	9/30/2023
Jamesburg BOE	12/31/2023
Pohatcong Township BOE	12/31/2023
Voorhees Township BOE	6/30/2024
Washington Borough BOE	12/31/2023
Watchung Hills Regional High School	12/31/2023
Mendham Township School District	1/31/2024
Shamong Township BOE	4/30/2024
Alexandria Township BOE	6/30/2024
MT. Holly Township BOE	6/30/2024
Bellmawr Public School District	6/30/2024
Bethlehem Township School District	6/30/2024
Black Horse Pike Regional BOE	6/30/2024
Burlington Township BOE	6/30/2024
Cinnaminson Township BOE	6/30/2024
Collingswood BOE	6/30/2024
Woodbury Heights BOE	6/30/2024
Delran BOE	6/30/2024
Florence Township BOE	6/30/2024
Frankford Township BOE	6/30/2024
Franklin Township Public Schools (GC)	6/30/2024
Fredon Township BOE	6/30/2024
Frelinghuysen Township BOE	6/30/2024
Greenwich Township BOE	6/30/2024
Hardyston Township BOE	6/30/2024
Harrison Township BOE	6/30/2024
High Point Regional BOE	6/30/2024
Lebanon Township BOE	6/30/2024
Mantua Township BOE	6/30/2024
Medford Lakes BOE	6/30/2024
Moorestown Twp Public Schools	6/30/2024
Ogdensburg School District	6/30/2024
Pennsauken BOE	6/30/2024
Plumsted BOE	6/30/2024
Rancocas Valley Regional BOE	6/30/2024
Riverside Township BOE	6/30/2024
South Harrison BOE	6/30/2024
Swedesboro-Woolwich BOE	6/30/2024
Tabernacle BOE	6/30/2024
West Deptford BOE	6/30/2024
White Township BOE	6/30/2024
Byram Township BOE	6/31/2024
Southampton Township BOE	6/31/2024
Lindenwold BOE	6/30/2024

School's Health Insurance Fund

Program Manager's Report

February 2024

Program Manager: Conner Strong & Buckelew

Brokers: brokerservice@permainc.com

ELIGIBILITY/ENROLLMENT:

Please direct any eligibility, enrollment, or system related questions to our dedicated SHIF enrollment team. To contact the team, email shifenrollments@permainc.com or fax to 856-685-2249.

System training (new and refresher) is provided to all contacts with WEX access **every 3rd Wednesday at 10AM (except June's training will be held Tuesday June 18th)**. Please contact HIFtraining@permainc.com for additional information or to request an invite.

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

COVERAGE UPDATES: None

EXPRESS-SCRIPTS UPDATE:

4Q2023 SaveOn Savings - In 2023, the School's Health Insurance Fund has saved \$2,290,574 for members enrolled in SaveOn, an additional \$529,472 in savings from 3Q2023. There are currently 393 participants in the program since January 2023, adding an additional 40 participants in 4Q2023. In 2023, SHIF members who used SaveOn saved a total of \$26,973 in copays. The average savings per prescription to date is \$1,075. Drugs for the treatment of inflammatory conditions remain the top drugs used by SHIF members in 2023 with 224 participants, an increase of 24 participants and \$298,586 in savings from 3Q2023. Please reference the 4Q2023 SaveOn report in the appendix of the agenda for additional information relating to the specific drugs being used and the associated savings for each drug in the SaveOn program.

Also included in the appendix is the 2024 SaveOn Drug listing. Please note the following effective 1/1/24:

- Drugs highlighted in green were added to the drug list, total of 28 new drugs
- Drugs highlighted in red were removed from the drug list, total of 7 drugs
 - SHIF had 4 members impacted by the drugs Gilenya and Aubagio being removed. Both drugs are used to treat Multiple Sclerosis. Impacted members received notification via U.S. mail as well as an outreach from SaveOn

OPERATIONAL UPDATES:

End of Year/Wellness Incentive Reporting

End of Year Reporting was sent to all SHIF group billing contacts on December 20th.

In addition to the End of Year report, a Wellness Incentive Program report has been provided reflecting employees who received a gym reimbursement in 2023, as this is taxable income. Wellness incentives provided directly to members that do not go towards their health insurance premiums are considered taxable income regardless of the amount. It is the employer's responsibility to report any wellness incentive as income on the employee's W-2 and withhold all appropriate income tax.

Please note the following:

- The report includes the participant's full name and total amount received in 2023
 - Aetna - up to \$240 per eligible participant
- Initial report will be for reimbursements issued for the time period of January 1, 2023 through November 30, 2023
 - Reports were sent to group billing contacts January 2nd
- An additional report will be provided in late January 2024 for reimbursements issued for submissions in December 2023.
 - Employers are responsible for updating an employee's W-2 withholdings once received
- All eligible employees, spouses and dependents (those over age 18) who received a reimbursement will be included in the report separately

Please note there is not an option to receive the latter report sooner than late January as the data is not available.

WEX Training Update

With the growth of the HIFs, we are currently reviewing our internal processes and how to make them the most efficient for our mutual clients. We have reviewed our current training workflow process and have made some minor adjustments to our WEX training sign up process, effective immediately.

1. We now have a new training mailbox, HIFtraining@permainc.com. All groups who need assistance with training should send the request to the HIF Training mailbox, **regardless of the HIF**. They should no longer send request for training to their assigned HIF mailbox
2. We will be using a SurveyMonkey link for users to sign up located in the directions (link and QR code) of the attached training schedule. While we understand there maybe exceptions, please encourage new HR admins/ groups to use the Survey Monkey. (link: <https://www.surveymonkey.com/r/WEXtrainingHIF>)
3. The training schedule will continue to be the 3rd Wednesday of every month at 10AM, with the exception of the June 2024 training, will be held on **Tuesday June 18th at 10AM**

PLEASE NOTE: Any issues relating to logging into WEX or specific questions relating to the group should be sent to the group's current assigned HIF mailbox. Only training requests should be sent to the HIF Training mailbox.

2024 Open Enrollment – April 22nd – May 10th

All enrollments and/or changes must be entered in WEX by **May 17th** in order for members to receive ID cards timely. As a reminder, only medical ID cards are issued via U.S. Mail. Prescription and dental ID cards are available through the carrier portal.

Updated communications for open enrollment are in process and will be shared with all brokers upon completion.

2024 LEGISLATIVE REVIEW

FREE COVID-19 At-Home Test – Effective November 20, 2023, free COVID-19 at home test kits are available for reorder from the government. Every U.S. household is eligible to order 4 free COVID-19 at home tests. <https://www.covid.gov/tests>

Medical and Rx Reporting: None

No Surprise Billing and Transparency – Continued Delays

The Health Insurance Funds, including SHIF, 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 SHIF 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

Appeals

Carrier Appeals

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
10/25/2023	Medical/Aetna	SHIF 2023-10-03	Denial of Assistant Surgeon	Upheld	10/28/2023
9/28/2023	Medical/Aetna	SHIF 2023-10-06	Denial of MRI	Upheld	10/11/2023
6/26/2023	Medical/Aetna	SHIF 2023-11-05	Investigational Lab Testing	Upheld	7/3/2023

09/08/2023	Medical/ Aetna	SHIF 2023-11-06	Out of Network DME	Upheld	10/02/2023
12/12/2023	Medical/ Aetna	SHIF 2023-12-03	Prosthetic services	Under Review	N/A
12/13/2023	Medical/ Aetna	SHIF 2023-12-04	Anesthesia services	Upheld	12/13/2023
12/21/2023	Medical/ Aetna	SHIF 2023-12-06	Anesthesia services	Upheld	12/21/2023
09/21/2023	Medical/ Aetna	SHIF 2023-12-07	Laboratory testing	Upheld	10/17/2023
12/28/2023	Medical/ Aetna	SHIF 2023-12-08	Acupuncture	Under Review	N/A
12/07/2023	Medical/ Aetna	SHIF 2024-01-03	Surgery Denial	Upheld	12/15/2023
10/27/2023	Medical/ Aetna	SHIF 2024-01-04	Laboratory testing	Upheld	11/16/2023
01/09/2024	Medical/ Aetna	SHIF 2024-01-05	PDN services	Upheld	01/17/2024
09/18/2023	Medical/ Aetna	SHIF 2024-02-01	Pathology services	Upheld	09/27/2023
02/09/2024	Medical/ Aetna	SHIF 2024-02-02	Injectable Drug Prior Authorization	Upheld	02/13/2024

IRO Submissions:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
10/31/2023	Medical/ Aetna	SHIF 2023-10-06	Denial of MRI	Upheld	10/27/2023
10/31/2023	Medical/ Aetna	SHIF 2023-10-06	Denial of MRI	Upheld	12/05/2023
12/06/2023	Medical/ Aetna	SHIF 2023-11-06	Out of Network DME	Overtaken	12/22/2023
12/27/2023	Medical/ Aetna	SHIF 2023-12-07	Laboratory testing	Overtaken	1/17/2024
01/04/2024	Medical/ Aetna	SHIF 2024-01-03	Surgery Denial	Overtaken	1/10/2024
01/22/2024	Medical/ Aetna	SHIF 2024-01-04	Laboratory testing	Upheld	1/31/2024
01/25/2024	Medical/ Aetna	SHIF 2024-01-05	PDN services	Overtaken	02/01/2024
02/08/2024	Medical/ Aetna	SHIF 2024-02-01	Pathology services	Under Review	N/A

Small Claim Committee Appeals: None

Submission Date	Appeal Type	Reason	Determination	Determination Date
2/5/2024	Dental/Delta	Adding child to plan outside of eligibility timeframe/OE	Upheld	10/28/2023



Online Enrollment System Training Schedule – 2024

PERMA offers a virtual training and a refresher class on the online enrollment system the third Wednesday of each month. The session provides an overview of the Fund's enrollment system and shows HR users how perform tasks in the system. To gain access to the Fund's enrollment system, each HR user must complete a system access form.

Wednesday, January 17th 10:00 am - 11:00 am

Wednesday, February 21st 10:00 am - 11:00 am

Wednesday, March 20th 10:00 am - 11:00 am

Wednesday, April 17th 10:00 am - 11:00 am

Wednesday, May 15th 10:00 am - 11:00 am

Tuesday, June 18th 10:00 am - 11:00 am

Wednesday, July 17th 10:00 am - 11:00 am

Wednesday, August 21st 10:00 am - 11:00 am

Wednesday, September 18th 10:00 am - 11:00 am

Wednesday, October 16th 10:00 am - 11:00 am

Wednesday, November 20th 10:00 am - 11:00 am



Please [click here](#) to sign up for a training session or use the QR code!

If there are any questions or issues, please send an email to HIFtraining@permainc.com. In the subject line of the email, please include: *Training - Fund Name and Client Name.*



Schools Health Insurance Fund
Board Meeting Summary
February 28, 2024



REFERRALS	12/1/23-1/31/24	10/1/23-11/30/23
Total Referrals	204	238
Total Referrals (ACUTE)	187	219
Total Referrals (COMPLEX)	17	19
Hospitalizations		
Total Members Hospitalized	155	160
Members Requiring ICU	6	18
Readmissions (Acute & Complex)	5/1	4/1
COVID-19 Requiring Admission	3	0
Complex Program Admissions	6	4
Mobilizations---Acute Program		
Inpatient Visits	127	149
Accompaniments	50	30
Home Visits	20	17
Mobilizations---Complex Program		
Inpatient Visits	13	15
Accompaniments	21	14
Home Visits	2	1
Acuity*	Acute/Chronic	Acute/Chronic
1	3/0	3/0
2	33/11	58/15
3	145/6	140/2
4 ICU	6/0	16/2
ICU Admissions		
# of Admissions	6	18
Insurer	3 Aetna 3 AmeriHealth	15 Aetna 3 AmeriHealth
Status	5 ICU patients engaged; 1 patient did not respond	16 ICU patients engaged; 1 declined GN assistance; 1 did not respond

*Acuity refers to priority of member medical situation. Acuity 3 includes hospitalized patients and oncology patients. This value relates to the time and complexity of the MCC intervention. Acuity 4 includes ICU patients.

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



Schools Health Insurance Fund
Board Meeting Summary
February 28, 2024



Addendum – 2023 Totals

	Referrals	Mobilizations*	Hospitalizations**
Total	1396	1239	866
Acute	1272	1042	839
Complex	50	179	26
Diabetic	74	7	1
Pediatric			119/839;1/26
Social Work		11	

*250 Accompaniments; 841 Hospital visits: 148 Home visits

**ICU Admissions: 61 (56 acute/5 complex)

1. Sixth nurse started in July. Referrals remained the same the second half of the year but there were approx. 150 more mobilizations after the sixth nurses started.
2. We have been able to focus more on pediatric patients with the addition of the sixth nurse who brought strong pediatric experience to the team.
3. Majority of referrals come from HSX (GN platform) with direct calls being the second highest.

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SCHOOL HEALTH INSURANCE FUND

ACH/WIRE BILLS LIST

DECEMBER 2023

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 23/24

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
W12230			
W12230	FLAGSHIP DENTAL PLANS	DENTAL CINNAMINSON BOE (COMPLETE) 12/1/2	1,575.26
W12230	FLAGSHIP DENTAL PLANS	DENTAL CINNAMINSON BOE 12/1/23	351.49
W12230	FLAGSHIP DENTAL PLANS	DENTAL LEAP 12/23	4,061.82
W12230	FLAGSHIP DENTAL PLANS	DENTAL-DEPTFORD TWP BOE 12/1/23	2,123.79
			8,112.36
W12231			
W12231	DELTACARE DMO	GLOUCESTER COUNTY IOT 12/1/23	348.64
W12231	DELTACARE DMO	GLOUCESTER COUNTY SSSD 12/1/23	835.61
			1,184.25
W12232			
W12232	CONNER STRONG & BUCKELEW	DELSEA-YOGA REIMBURSEMENT 10/23-11/23	1,280.00
W12232	CONNER STRONG & BUCKELEW	GUARDIAN NURSES 12/23 INV 4112	111,394.50
			112,674.50
W12233			
W12233	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 12/23	8,050.46
W12233	CONNER STRONG & BUCKELEW	DENTAL PROGRAM MGR 12/23	18,287.54
W12233	CONNER STRONG & BUCKELEW	MEDICAL- PROGRAM MANAGER FEES 12/23	445,821.42
W12233	CONNER STRONG & BUCKELEW	RX- PROGRAM MGR 12/23	64,080.99
W12233	CONNER STRONG & BUCKELEW	BROKER FEES 12/23	581,227.83
			1,117,468.24
W12234			
W12234	VERRILL & VERRILL, LLC	TREASURER FEE 12/23	2,246.48
			2,246.48
W12235			
W12235	J. KENNETH HARRIS, ATTY AT LAW	ATTORNEY FEES 12/23	3,228.17
			3,228.17
W12236			
W12236	DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 12/23	20,994.36
			20,994.36
W12237			
W12237	AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 12/23	611,912.00
W12237	AETNA LIFE INSURANCE COMPANY	VISION TPA 12/23	652.47
			612,564.47
Total Payments FY 23-24			1,878,472.83
TOTAL PAYMENTS ALL FUND YEARS			1,878,472.83

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

CHECKS BILLS LIST

DECEMBER 2023

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 23-24

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
003923			
003923	EVERSIDE HEALTH, LLC	MEMBERSHIP 11/23 INV 34777	2,700.00
			2,700.00
003924			
003924	HORIZON BCBSNJ	MEDICAL TPA- HORIZON 12/23	1,405.75
			1,405.75
003925			
003925	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA- AMERIHEALTH 12/23	138,594.12
			138,594.12
003926			
003926	PAYFLEX	HSA FEE CHATHAMS 12/23	12.00
003926	PAYFLEX	HSA FEE CHATHAMS 11/23	12.00
003926	PAYFLEX	HSA FEE-MOORESTOWN 11/23	3.00
003926	PAYFLEX	HSA FEE MOORESTOWN 12/23	3.00
			30.00
003927			
003927	PERMA RISK MANAGEMENT SERVICES	REIMB 10/23 AC CONVENTION EXPENSE	1,435.17
003927	PERMA RISK MANAGEMENT SERVICES	REIMB. 10/23 AC CONVENTION BOOTH	1,867.19
003927	PERMA RISK MANAGEMENT SERVICES	ADMINISTRATION FEES 12/23	203,202.56
003927	PERMA RISK MANAGEMENT SERVICES	POSTAGE 11/23	50.29
			206,555.21
003928			
003928	MEDICAL EVALUATION SPECIALISTS	MES CASE # 2228042 11/24/23	306.25
003928	MEDICAL EVALUATION SPECIALISTS	MES CASE # 2220700 11/13/23	245.00
			551.25
003929			
003929	HOSPITALITY MANAGEMENT SERVICES	LUNCH FOR MEETING INV 84122 11/23	861.60
			861.60
003930			
003930	HQSI, INC	REVIEW CASE 3035307 INV 231130 11/22/23	500.00
003930	HQSI, INC	REVIEW- CASE 3017867 INV 231031 10/23	625.00
003930	HQSI, INC	REVIEW CASE 3024813 INV 231115 11/2/23	625.00
			1,750.00
003931			
003931	AETNA BEHAVIORAL HEALTH LLC	LEAP ACADEMY-FOR 1/24 E0307038	470.00
			470.00
003932			
003932	MUNICIPAL REINSURANCE HIF	SPECIFIC REINSURANCE 12/23	930,372.08
			930,372.08
Total Payments FY 23-24			1,283,290.01
TOTAL PAYMENTS ALL FUND YEARS			1,283,290.01

Chairperson

Attest:

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

Dated: _____

Treasurer

SCHOOL HEALTH INSURANCE FUND

WELLNESS CHECKS BILLS LIST

DECEMBER 2023

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 22-23

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
003933			
003933	NORTHERN BURLINGTON REGIONAL SCHOOL	WELL. CREDIT ACTIVEFIT PO 22-00875 6/23	740.00
003933	NORTHERN BURLINGTON REGIONAL SCHOOL	WELL CREDIT-ACTIVEFIT. PO 22-00875 5/23	680.00
			1,420.00

Total Payments FY 22-23

1,420.00

FUND YEAR 23-24

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
003934			
003934	SWEDESBORO-WOOLWICH SCHOOL DISTRICT	WELL. REIMB. BINGO & PRIZES 09/23-11/23	336.82
			336.82
003935			
003935	NORTHERN BURLINGTON REGIONAL SCHOOL	9/23 ACTIVEFIT & MGMT FEE PO 22-00875	364.10
003935	NORTHERN BURLINGTON REGIONAL SCHOOL	8/23 ACTIVEFIT&MGMT FEE PO 22-00875	364.10
003935	NORTHERN BURLINGTON REGIONAL SCHOOL	7/23 ACTIVEFIT INCENTIVE PO 22-00875	740.00
003935	NORTHERN BURLINGTON REGIONAL SCHOOL	7/ 23 ACTIVEFIT& MGMT FEE PO 22-00875	364.10
003935	NORTHERN BURLINGTON REGIONAL SCHOOL	8/23 ACTIVEFIT INCENTIVE PO 22-00875	680.00
003935	NORTHERN BURLINGTON REGIONAL SCHOOL	10/23 ACTIVEFIT & MGMT FEE PO 22-00875	364.10
			2,876.40
003936			
003936	FITNESS COACHING, LLC	WELL. - BERLIN YOGA/BOOTCAMP 10/23 11/23	800.00
003936	FITNESS COACHING, LLC	WELL. BERLIN-YOGA/BOOTCAMP 11/23-12/23	800.00
			1,600.00
003937			
003937	MANSFIELD TWSP SCHOOL DISTRICT	REIMB -ACTIVEFIT MGMT & INCEN.7/23-11/23	1,014.00
			1,014.00
003938			
003938	FRANKFORD TOWNSHIP BOE	WELLNESS COORD. REIMB 07/23-12/23	4,022.15
			4,022.15
003939			
003939	WELLNESS COACHES (RAMP HEALTH)	WELL. COACH- SWEDESBORO INV 37290 12/23	1,970.00
			1,970.00
003940			
003940	US WELLNESS, INC.	HEALTH FAIR- MOORESTOWN BOE 10/23	8,397.57
003940	US WELLNESS, INC.	WELLNESS PORTAL- W. DEPTFORD 10/23	1,000.00
003940	US WELLNESS, INC.	WELLNESS PORTAL - 11/23-12/23	2,000.00
003940	US WELLNESS, INC.	WELLNESS PORTAL W. DEPTFORD 11/23-12/23	2,000.00
003940	US WELLNESS, INC.	WELLNESS PORTAL POPULATION - 10/23	1,810.00
003940	US WELLNESS, INC.	STRESS RELIEF CLINTON BOE 10/23	750.00
003940	US WELLNESS, INC.	WELLNESS PORTAL SUMMIT- 11/23-12/23	2,500.00
003940	US WELLNESS, INC.	WELLNESS PORTAL- POPULATION-11/23-12/23	3,260.00
003940	US WELLNESS, INC.	WELLNESS PORTAL- LINDENWOLD 10/23	1,000.00
003940	US WELLNESS, INC.	HEALTH FAIR KINGWAY BOE 10/23	2,659.60
003940	US WELLNESS, INC.	WELLNESS PORTAL EWING BOE 10/23	1,000.00
			26,377.17

003941			
003941	DELSEA REGIONAL HIGH SCHOOL DISTRICT	WELLNESS-MASSAGE COPAY 10/23&12/23	842.00
			842.00
003942			
003942	BURLINGTON TWP BOE EDUCATION FOUNDATION	REIMB. FOR CHAIR MASSAGE PO 23-00980	3,000.00
			3,000.00
003943			
003943	RIVERSIDE TOWNSHIP BOARD OF EDUCATION	WELL. REIMB. WELL COACHES INV 80170	3,540.00
			3,540.00
003944			
003944	ADVANTA HEALTH SOLUTIONS	11/23 ACTIVEFIT & MGMT FEE- 7237 LENAPE	1,731.00
003944	ADVANTA HEALTH SOLUTIONS	09/23 ACTIVEFIT CREDIT DELSEA INV 7240	60.00
003944	ADVANTA HEALTH SOLUTIONS	09/23 ACTIVEFIT CREDITS- 7238 LENAPE	3,700.00
003944	ADVANTA HEALTH SOLUTIONS	11/23 ACTIVEFIT MGMT FEE INV 7239 DELSEA	321.20
			5,812.20
003945			
003945	VOORHEES TOWNSHIP BOARD OF EDUCATION	REIMBURSE- 23-24 HEALTHY DIGEST 8/23	3,540.00
			3,540.00
003946			
003946	SCHOOL DISTRICT OF THE CHATHAMS	WELLNESS- 10/23-11/23	2,143.96
003946	SCHOOL DISTRICT OF THE CHATHAMS	REIMB. FOR STEP CHALLENGE PO 24-1768	426.00
			2,569.96
		Total Payments FY 23-24	57,500.70
		TOTAL PAYMENTS ALL FUND YEARS	58,920.70

Chairperson

Attest:

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

Dated: _____

Treasurer

SCHOOL HEALTH INSURANCE FUND

ACH/WIRE BILLS LIST

JANUARY 2024

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 CLOSED

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
W01240			
W01240	SOUTHERN COASTAL REGIONAL	ALLOWAY RETAINED EARNINGS TRANSFER	14,972.48
			14,972.48
		Total Payments FY CLOSED	14,972.48

FUND YEAR 23-24

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
W01241			
W01241	DELTACARE DMO	GLOUCESTER COUNTY IOT 01/01/24	224.44
W01241	DELTACARE DMO	GLOUCESTER COUNTY SSSD 01/01/24	868.95
			1,093.39
W01242			
W01242	FLAGSHIP DENTAL PLANS	DENTAL-DEPTFORD TWP BOE 01/24	2,168.91
W01242	FLAGSHIP DENTAL PLANS	DENTAL CINNAMINSON BOE 01/24	351.49
W01242	FLAGSHIP DENTAL PLANS	DENTAL CINNAMINSON BOE (COMPLETE) 01/24	1,544.19
W01242	FLAGSHIP DENTAL PLANS	DENTAL CINNAMINSON BOE (COMPLETE) 01/24	4,184.48
			8,249.07
W01243			
W01243	AETNA LIFE INSURANCE COMPANY	VISION TPA 01/24	654.29
W01243	AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 01/24	620,212.60
			620,866.89
W01244			
W01244	DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 01/24	20,803.56
			20,803.56
W01245			
W01245	J. KENNETH HARRIS, ATTY AT LAW	ATTORNEY FEES 01/24	3,228.17
			3,228.17
W01246			
W01246	VERRILL & VERRILL, LLC	TREASURER FEES 01/24	2,246.48
			2,246.48
W01247			
W01247	CONNER STRONG & BUCKELEW	RX- PROGRAM MGR 01/24	64,254.87
W01247	CONNER STRONG & BUCKELEW	MEDICAL- PROGRAM MGR FEES 01/24	451,804.50
W01247	CONNER STRONG & BUCKELEW	BROKER FEES 01/24	598,745.12
W01247	CONNER STRONG & BUCKELEW	DENTAL PROGRAM MGR 01/24	18,121.34
W01247	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 01/24	8,158.50
			1,141,084.33

W01248			
W01248	CONNER STRONG & BUCKELEW	GUARDIAN NURSES 01/24	111,394.50
			111,394.50
W01249			
W01249	ACTUARIAL SOLUTIONS, LLC	Q1 2024 ACTUARY FEES	7,433.25
			7,433.25
W0124A			
W0124A	FITNESS COACHING, LLC	WELL.-YOGA/BOOTCAMP- BERLIN 12/23-01/24	800.00
			800.00
W0124B			
W0124B	FITNESS COACHING, LLC	REPLACE 10/23 CK # 3905 WELLNESS YOGA	400.00
			400.00
		Total Payments FY 23-24	1,917,599.64
		TOTAL PAYMENTS ALL FUND YEARS	1,932,572.12

Chairperson

Attest:

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

Dated: _____

Treasurer

SCHOOL HEALTH INSURANCE FUND

CHECKS BILLS LIST

JANUARY 2024

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 22-23

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
003947			
003947	BOWMAN & COMPANY LLP	SERVICES FOR AUDIT FOR P/E 6/30/23	20,196.00
			20,196.00
		Total Payments FY 22-23	20,196.00

FUND YEAR 23-24

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
003905			
003905	FITNESS COACHING, LLC	VOID-REISSUE AS WIRE	-400.00
			-400.00
003925			
003925	AMERIHEALTH ADMINISTRATORS	VOID AND REISSUE	-138,594.12
			-138,594.12
003948			
003948	EVERSIDE HEALTH, LLC	MEMBERSHIP 12/23 INV 35122	2,700.00
			2,700.00
003949			
003949	HORIZON BCBSNJ	MEDICAL TPA 01/24	1,180.83
			1,180.83
003950			
003950	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 01/24	140,517.06
003950	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA- AMERIHEALTH 12/23	138,594.12
			279,111.18
003951			
003951	KEPRO	REVIEW SERVICE 1/9/24 CRS-00045-24	700.00
003951	KEPRO	REVIEW SERVICE 12/22/23 CRS08774-23	425.00
			1,125.00
003952			
003952	PERMA RISK MANAGEMENT SERVICES	POSTAGE 12/23	96.58
003952	PERMA RISK MANAGEMENT SERVICES	ADMINISTRATION FEES 01/24	205,439.52
			205,536.10
003953			
003953	MEDICAL EVALUATION SPECIALISTS	MES CASE 2253058 12/22/23	245.00
003953	MEDICAL EVALUATION SPECIALISTS	MES CASE 2248754 12/15/23	183.75
			428.75
003954			
003954	WELLNESS COACHES dba RAMP HEALTH	WELL. COACH- SWEDESBORO INV 37410 01/24	1,970.00
			1,970.00

003955			
003955	US WELLNESS, INC.	ONSITE SCREEN/WEBINARS 11/23-12/23	2,693.41
			2,693.41
003956			
003956	AETNA BEHAVIORAL HEALTH LLC	LEAP ACADEMY-FOR 1/24 E0309064	470.00
			470.00
003957			
003957	SANDYSTON - WALPACK CONSOLIDATED SCHOOL	UNUSED BROKER FEE	7,899.42
			7,899.42
003958			
003958	ADVANTA HEALTH SOLUTIONS	ACTIVEFIT CREDIT DELSEA INV 7277 10/23	60.00
003958	ADVANTA HEALTH SOLUTIONS	12/23 ACTIVEFIT FEE-INV 7309-BETHLEHEM	97.92
003958	ADVANTA HEALTH SOLUTIONS	ACTIVEFIT FEE INV 7276 DELSEA 12/23	321.20
003958	ADVANTA HEALTH SOLUTIONS	12/23 ACTIVFIT/MGMT -7311 CHESTERFIELD	25.92
003958	ADVANTA HEALTH SOLUTIONS	12/23 ACTIVEFIT/MGT INV 7310 WATCHUNG	34.56
003958	ADVANTA HEALTH SOLUTIONS	11/23 ACTIVFIT FEE/IMPLEMENT. BETHLEHEM	1,197.92
003958	ADVANTA HEALTH SOLUTIONS	11/23 ACT. FEE/IMPLEM. WATCHUNG -7272	1,134.56
003958	ADVANTA HEALTH SOLUTIONS	11/23 ACT. FEE/ IMPLEM 7273 CHESTERFIELD	1,125.92
003958	ADVANTA HEALTH SOLUTIONS	10/23 ACTIVEFIT CREDITS- 7275 LENAPE	3,800.00
003958	ADVANTA HEALTH SOLUTIONS	12/23 ACTIVEFIT FEE- 7274 LENAPE	1,732.00
			9,530.00
003959			
003959	CONNER STRONG & BUCKELEW	SELECTIVE-SURETY PUBLIC OFF. 1/24-1/25	567.00
003959	CONNER STRONG & BUCKELEW	SELECTIVE-. SURETY-PUBLIC OFF. 1/24-1/25	1,400.00
			1,967.00
003960			
003960	MUNICIPAL REINSURANCE HIF	SPECIFIC REINSURANCE 01/24	996,630.56
			996,630.56
		Total Payments FY 23-24	1,372,248.13
		TOTAL PAYMENTS ALL FUND YEARS	1,392,444.13

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

CHECKS BILLS LIST

FEBRUARY 2024

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 23-24

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
003961			
003961	EVERSIDE HEALTH, LLC	MEMBERSHIP 1/24 INV 35516	2,854.00
			2,854.00
003962			
003962	HORIZON BCBSNJ	MEDICAL TPA 02/24	1,349.52
			1,349.52
003963			
003963	AMERIHEALTH ADMINISTRATORS	MEDICAL TPA 02/24	138,843.39
			138,843.39
003964			
003964	KEPRO	REVIEW SERVICE 11/9/23 CRS07859-23	675.00
			675.00
003965			
003965	PERMA RISK MANAGEMENT SERVICES	2023 AATRIX 1099 FILING FEE	46.80
003965	PERMA RISK MANAGEMENT SERVICES	POSTAGE 01/24	33.45
003965	PERMA RISK MANAGEMENT SERVICES	ADMINISTRATION FEES 02/24	205,195.98
			205,276.23
003966			
003966	MEDICAL EVALUATION SPECIALISTS	MES CASE 2270516 1/10/24	225.00
003966	MEDICAL EVALUATION SPECIALISTS	MES CASE 2289706 1/31/24	367.50
			592.50
003967			
003967	GANNETT NEW YORK NJ LOCAIQ	a# 1123724 inv 6109234-9600176 12/7/23	40.75
003967	GANNETT NEW YORK NJ LOCAIQ	A# 1123724 INV 6035797- 9465882 11/3/23	71.31
			112.06
003968			
003968	HQSI, INC	REVIEW CASES 3114683 & 3151512 1/24	1,125.00
			1,125.00
003969			
003969	WELLNESS COACHES dba RAMP HEALTH	WELL. COACH- SWEDESBORO-37536 2/24	1,970.00
			1,970.00
003970			
003970	US WELLNESS, INC.	SCREENINGS- STILLWATER 01/08/24	1,123.03
003970	US WELLNESS, INC.	BIOMETRIC -CLEARVIEW BOE 1/12/24	980.77
003970	US WELLNESS, INC.	STRETCHES - CLINTON TWSP 1/17/24	250.00
			2,353.80
003971			
003971	AETNA BEHAVIORAL HEALTH LLC	LEAP ACADEMY-FOR 2/24 INV E0311768	470.00
			470.00

003972			
003972	NJ ADVANCE MEDIA	CLIENT 52354-11/2/23-23-24 MEETING	15.60
003972	NJ ADVANCE MEDIA	CLIENT 52156 AD 12/7/23 RESOLUTION	26.66
003972	NJ ADVANCE MEDIA	CLIENT 52354- 11/2/23 CONTRACT AWARD	38.48
003972	NJ ADVANCE MEDIA	CLIENT 52156 AD 11/2/23 MEETING 23-24	46.28
003972	NJ ADVANCE MEDIA	CLIENT 52156 11/2/23 CONTRACTS	98.90
003972	NJ ADVANCE MEDIA	CLIENT 52354- AD 12/7/23 R#33-23	10.92
			236.84
003973			
003973	ADVANTA HEALTH SOLUTIONS	ACTIVEFIT/ MGMT FEE WATCHUNG- 01/24	34.56
003973	ADVANTA HEALTH SOLUTIONS	ACTIVEFIT & MGMT FEE 01/24 BETHLEHEM	97.20
003973	ADVANTA HEALTH SOLUTIONS	ACTIVEFIT/MGMT FEE CHESTERFIELD 01/24	25.92
003973	ADVANTA HEALTH SOLUTIONS	ACTIVEFIT CREDITS LENAPE 11/23	3,520.00
003973	ADVANTA HEALTH SOLUTIONS	ACTIVEFIT/MGMT FEE LENAPE 01/24	1,735.00
003973	ADVANTA HEALTH SOLUTIONS	ACTIVEFIT CREDITS- DELSEA 11/23	80.00
003973	ADVANTA HEALTH SOLUTIONS	ACTIVEFIT/MGMT FEE- DELSEA 01/24	321.20
			5,813.88
003974			
003974	ACCESS	INV 10628517 DEPT 962 11/30/23 FOR DEC	15.45
003974	ACCESS	INV 10647855 DEPT 962 12/31/23 FOR JAN	15.45
003974	ACCESS	INV 10543120 DEPT 962 10/31/23 FOR NOV	15.12
			46.02
003975			
003975	MUNICIPAL REINSURANCE HIF	SPECIFIC REINSURANCE 02/24	994,727.14
			994,727.14
		Total Payments FY 23-24	1,356,445.38
		TOTAL PAYMENTS ALL FUND YEARS	1,356,445.38

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
ACH/WIRE BILLS LIST

FEBRUARY 2024

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 23-24

<u>CheckNumber</u>	<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
W00224	J. KENNETH HARRIS, ATTY AT LAW	ATTORNEY FEES 02/24	3,228.17
			3,228.17
W02240			
W02240	DELTACARE DMO	GLOUCESTER COUNTY IOT 02/01/24	279.42
W02240	DELTACARE DMO	GLOUCESTER COUNTY SSSD 02/01/24	868.95
			1,148.37
W02241			
W02241	FLAGSHIP DENTAL PLANS	DENTAL-DEPTFORD TWP BOE 02/24	2,297.77
W02241	FLAGSHIP DENTAL PLANS	DENTAL CINNAMINSON BOE 02/24	375.05
W02241	FLAGSHIP DENTAL PLANS	DENTAL CINNAMINSON BOE (COMPLETE) 02/24	1,544.19
W02241	FLAGSHIP DENTAL PLANS	DENTAL LEAP ACADEMY 02/24	4,232.91
			8,449.92
W02242			
W02242	AETNA LIFE INSURANCE COMPANY	VISION TPA 02/24	654.29
W02242	AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 02/24	620,212.60
			620,866.89
W02243			
W02243	DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 02/24	20,851.26
			20,851.26
W02245			
W02245	VERRILL & VERRILL, LLC	TREASURER FEES 02/24	2,246.48
			2,246.48
W02246			
W02246	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 02/24	8,142.22
W02246	CONNER STRONG & BUCKELEW	DENTAL PROGRAM MGR 02/24	18,162.89
W02246	CONNER STRONG & BUCKELEW	MEDICAL- PROGRAM MGR FEES 02/24	450,902.94
W02246	CONNER STRONG & BUCKELEW	RX- PROGRAM MGR 02/24	64,080.99
W02246	CONNER STRONG & BUCKELEW	BROKER FEES 02/24	597,289.06
			1,138,578.10
W02247			
W02247	CONNER STRONG & BUCKELEW	GUARDIAN NURSES 02/24	111,394.50
			111,394.50
W02248			
W02248	INSPIRA FINNCIAL HEALTH, INC	HSA FEE CHATHAMS 01/24	12.00
W02248	INSPIRA FINNCIAL HEALTH, INC	HSA FEE MOORESTOWN 01/24	3.00
			15.00
W02249			
W02249	FITNESS COACHING, LLC	WELL.-YOGA/BOOTCAMP- BERLIN 1/24-2/24	1,000.00
			1,000.00
		Total Payments FY 23-24	1,907,778.69
		TOTAL PAYMENTS ALL FUND YEARS	1,907,778.69

Chairperson

Attest:

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: 2023-24								
Month Ending: December								
	Medical	Dental	Rx	Reinsurance	Admin	Closed Year	Retained Dividend	TOTAL
OPEN BALANCE	40,028,314.93	809,047.19	705,763.16	(395,217.41)	18,784,267.65	99,867,387.88	22,432,597.99	182,232,161.39
RECEIPTS								
Assessments	47,677,178.55	553,058.32	4,195,305.27	1,176,501.35	3,878,973.54	0.00	0.00	57,481,017.03
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Invest Pymnts	374,931.54	6,821.92	39,608.84	0.00	158,389.54	842,085.14	189,152.41	1,610,989.39
Invest Adj	0.04	0.00	0.00	0.00	0.00	0.00	0.00	0.04
Subtotal Invest	374,931.58	6,821.92	39,608.84	0.00	158,389.54	842,085.14	189,152.41	1,610,989.43
Other *	149,504.03	0.00	1,731,966.95	0.00	0.00	0.00	0.00	1,881,470.98
TOTAL	48,201,614.16	559,880.24	5,966,881.06	1,176,501.35	4,037,363.08	842,085.14	189,152.41	60,973,477.44
EXPENSES								
Claims Transfers	34,852,752.95	281,271.16	5,443,728.25	0.00	0.00	0.00	0.00	40,577,752.36
Expenses	2,700.00	9,296.61	0.00	930,372.08	2,278,314.85	0.00	0.00	3,220,683.54
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	34,855,452.95	290,567.77	5,443,728.25	930,372.08	2,278,314.85	0.00	0.00	43,798,435.90
END BALANCE	53,374,476.14	1,078,359.66	1,228,915.97	(149,088.14)	20,543,315.88	100,709,473.02	22,621,750.40	199,407,202.93

SUMMARY OF CASH AND INVESTMENT INSTRUMENTS									
SCHOOLS HEALTH INSURANCE FUND									
ALL FUND YEARS COMBINED									
CURRENT MONTH	December								
CURRENT FUND YEAR	2023-24								
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	
ID Number:									
Maturity (Yrs)									
Purchase Yield:		5.49	5.49	5.49	1.25	5.07	5.34	5.25	
TOTAL for All Accts & instruments									
Opening Cash & Investment Balance	\$182,232,161.42	\$ 4,227,999.03	\$ 394,077.21	\$ 55,176,099.32	\$ 39,416.24	\$ 941.99	\$ 159,214.85	\$ 8,441,603.02	
Opening Interest Accrual Balance	\$3.93	\$ -	\$ -	\$ -	\$ -	\$ 3.93	\$ -	\$ -	
1	Interest Accrued and/or Interest Cost	\$4.07	\$0.00	\$0.00	\$0.00	\$4.07	\$0.00	\$0.00	
2	Interest Accrued - discounted Instr.s	\$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	
4	Accretion	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
5	Interest Paid - Cash Instr.s	\$1,610,985.47	\$34,986.32	\$5,168.49	\$252,340.84	\$40.52	\$0.00	\$724.09	\$8,983.24
6	Interest Paid - Term Instr.s	\$3.93	\$0.00	\$0.00	\$0.00	\$3.93	\$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
8	Net Investment Income	\$1,610,989.54	\$34,986.32	\$5,168.49	\$252,340.84	\$40.52	\$4.07	\$724.09	\$8,983.24
9	Deposits - Purchases	\$241,535,154.76	\$88,362,488.01	\$3,220,683.54	\$43,000,000.00	\$0.00	\$0.00	\$0.00	\$16,030,608.21
10	(Withdrawals - Sales)	-\$225,971,102.65	-\$86,798,435.90	-\$3,220,683.54	-\$30,000,000.00	\$0.00	\$0.00	\$0.00	-\$24,000,000.00
		OK	OK	OK	OK	OK	OK	OK	
	Ending Cash & Investment Balance	\$199,407,202.93	\$5,827,037.46	\$399,245.70	\$68,428,440.16	\$39,456.76	\$945.92	\$159,938.94	\$481,194.47
	Ending Interest Accrual Balance	\$4.07	\$0.00	\$0.00	\$0.00	\$4.07	\$0.00	\$0.00	\$0.00
	Plus Outstanding Checks	\$1,345,346.91	\$0.00	\$1,345,346.91	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	(Less Deposits in Transit)	-\$1,491,520.00	-\$1,491,520.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Balance per Bank	\$199,261,029.84	\$4,335,517.46	\$1,744,592.61	\$68,428,440.16	\$39,456.76	\$945.92	\$159,938.94	\$481,194.47

Continued below

Parke Bank – Certificate of Deposit #9000742721	Parke Bank - Certificate of Deposit #9000789412	Cornerstone Investment Account	TD Bank Money Market Account	TD Bank - Certificate of Deposit #3283056171	TD Bank - Certificate of Deposit #3283056288	TD Bank - Certificate of Deposit #3283506192	Republic Bank - Certificate of Deposit #595063486
12/7/2023	12/7/2023			1/8/2024	12/7/2023	12/7/2023	3/7/2024
4.20	4.20	5.70	5.50	5.58	5.67	5.67	5.75
\$ 6,000,000.00	\$ 10,000,000.00	\$ 11,505,094.43	\$ 11,287,715.33	\$ 10,000,000.00	\$ 15,000,000.00	\$ 50,000,000.00	\$ -
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$17,950.68	\$12,657.53	\$55,697.27	\$301,061.49	\$0.00	\$212,625.00	\$708,750.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$17,950.68	\$12,657.53	\$55,697.27	\$301,061.49	\$0.00	\$212,625.00	\$708,750.00	\$0.00
\$0.00	\$0.00	\$0.00	\$65,921,375.00	\$0.00	\$0.00	\$0.00	\$25,000,000.00
-\$6,017,950.68	-\$10,012,657.53	\$0.00	\$0.00	\$0.00	-\$15,212,625.00	-\$50,708,750.00	\$0.00
OK	OK	OK	OK	OK	OK	OK	OK
\$0.00	\$0.00	\$11,560,791.70	\$77,510,151.82	\$10,000,000.00	\$0.00	\$0.00	\$25,000,000.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$11,560,791.70	\$77,510,151.82	\$10,000,000.00	\$0.00	\$0.00	\$25,000,000.00

CERTIFICATION AND RECONCILIATION OF CLAIMS PAYMENTS AND RECOVERIES									
SCHOOLS HEALTH INSURANCE FUND									
Month		December							
Current Fund Year		2023-24							
		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	December	December	December	December	Reconciled	Variance From	Month
2023-24	Medical	189,247,921.05	34,852,752.95	0.00	224,100,674.00	0.00	224,100,674.00	189,247,921.05	34,852,752.95
	Dental	1,989,558.51	281,271.16	0.00	2,270,829.67	0.00	2,270,829.67	1,989,558.51	281,271.16
	Rx	27,342,792.94	5,443,728.25	0.00	32,786,521.19	0.00	32,786,521.19	27,342,792.94	5,443,728.25
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	218,580,272.50	40,577,752.36	0.00	259,158,024.86	0.00	259,158,024.86	218,580,272.50	40,577,752.36



SCHOOLS HEALTH INSURANCE FUND

Monthly Claim Activity Report

February 28, 2024



SCHOOLS HEALTH INSURANCE FUND

	MEDICAL CLAIMS PAID 2022-2023	# OF EES	PER EE	MEDICAL CLAIMS PAID 2023-2024	# OF EES	PER EE
JULY	\$20,653,856	15,510	\$1,332	\$26,217,206	17,767	\$1,476
AUGUST	\$29,975,105	15,369	\$1,950	\$34,693,037	17,580	\$1,973
SEPTEMBER	\$22,221,075	15,808	\$1,406	\$30,707,053	18,001	\$1,706
OCTOBER	\$21,393,357	15,780	\$1,356	\$35,222,685	17,972	\$1,960
NOVEMBER	\$26,337,598	15,983	\$1,648	\$29,759,718	17,954	\$1,658
DECEMBER	\$23,003,951	15,958	\$1,442	\$28,202,183	17,978	\$1,569
JANUARY	\$27,378,278	16,389	\$1,671			
FEBRUARY	\$23,896,107	16,404	\$1,457			
MARCH	\$24,587,502	16,430	\$1,497			
APRIL	\$24,056,667	16,446	\$1,463			
MAY	\$32,557,891	16,428	\$1,982			
JUNE	\$29,522,805	16,458	\$1,794			
TOTALS	\$305,584,191			\$184,801,881		
				2023-2024 Avg.	17,875	\$ 1,724
				2022-2023 Avg.	16,080	\$ 1,583

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: 11/01/2023 - 11/30/2023
 Service Dates: 01/01/2011 - 11/30/2023
 Line of Business: All

	Paid Amt	Diagnosis/Treatment
	\$386,245.17	SINGLE LIVEBORN INFANT, DELIVERED BY CESAREAN
	\$332,060.41	SINGLE LIVEBORN INFANT, DELIVERED BY CESAREAN
	\$174,102.84	NONTRAUMATIC SUBARACHNOID
	\$173,799.39	NONRHEUMATIC MITRAL (VALVE) INSUFFICIENCY
	\$155,612.04	MAJOR DEPRESSIVE DISORDER, RECURRENT
	\$132,633.24	ALPORT SYNDROME
	\$129,781.46	SINGLE LIVEBORN INFANT, DELIVERED BY CESAREAN
	\$118,096.72	BENIGN NEOPLASM OF CEREBRAL MENINGES
	\$110,942.25	SPINAL STENOSIS, CERVICAL REGION
	\$104,250.12	MULTIPLE SCLEROSIS
	\$102,086.71	INCONTINENTIA PIGMENTI
	\$100,670.57	SINGLE LIVEBORN INFANT, DELIVERED BY CESAREAN
Total:	\$2,020,280.92	

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: 12/01/2023 - 12/31/2023
 Service Dates: 01/01/2011 - 12/31/2023
 Line of Business: All

Paid Amt	Diagnosis/Treatment
\$317,881.32	ACUTE RESPIRATORY DISTRESS SYNDROME
\$254,763.60	SINGLE LIVEBORN INFANT, DELIVERED VAGINALLY
\$197,971.41	MYELODYSPLASTIC SYNDROME, UNSPECIFIED
\$183,508.92	NEOPLASM RELATED PAIN (ACUTE) (CHRONIC)
\$182,597.37	TWIN LIVEBORN INFANT, DELIVERED BY CESAREAN
\$163,668.03	ANEURYSM OF THE ASCENDING AORTA, WITHOUT RUPTURE
\$143,278.33	OBSTRUCTIVE HYPERTROPHIC
\$142,519.69	NONRHEUMATIC AORTIC (VALVE) STENOSIS
\$140,755.20	ENCOUNTER FOR ANTINEOPLASTIC
\$138,818.43	MULTIPLE SCLEROSIS
\$133,936.62	MALIGNANT NEOPLASM OF PROSTATE
\$122,825.41	SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC
\$118,057.25	SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC
\$110,507.87	ENCOUNTER FOR ANTINEOPLASTIC
\$108,332.94	PERITONEAL ABSCESS
\$108,053.74	ENCOUNTER FOR SURGICAL AFTERCARE FOLLOWING
\$104,873.82	HEMIPLEGIA AND HEMIPARESIS FOLLOWING
\$104,106.67	CONGENITAL INSUFFICIENCY OF AORTIC VALVE
Total:	\$2,776,456.62



Schools Health Insurance Fund

1/1/23 through 12/31/23 (Unless otherwise noted)

Dashboard

Medical Claims Paid Per Employee July 2023 – December 2023

Total Medical Paid per Employee:
\$1,724

Network Discounts

Inpatient: **67.6%**
Ambulatory: **69.6%**
Physician/Other: **61.0%**
TOTAL: 65.8%

Provider Network

% Admissions In-Network: **98.1%**
% Physician Office: **97.1%**

Aetna Book of Business:
Admissions 97.8%; Physician 91.6%

Top Facilities Utilized

(by total Medical Spend)

- Virtua-West Jersey
- Morristown Medical Center
- CHOP
- Cooper
- Kennedy Memorial Hospital

Claimants Over \$50,000 (January 2023 – December 2023)

Number of Claims Over \$50,000: **885**
Claimants per 1000 members: **19.2**
Avg. Paid per Claimant: **\$127,810**
Percent of Total Paid: **34.2%**
• Aetna BOB- HCC account for an average of 41.9% of total Medical Cost

Teladoc Activity: January 2023– December 2023

Total Registrations: **1,626**
Total Online Visits: **3,639**
Total Net Claims Savings: **\$1.85M**
Total Visits w/ Rx: 1,804

Utilization by Age

0-17: 12.8%
18-26: 10.7%
27-30: 7.5%
31-45: 41.1%
46-55: 16.6%
55-65: 7.9%
66+: 1.3%

Mental Health Visits: 1,176
Dermatology Visits: 184

Allentown Service Center Performance Goal Metrics YTD 2023

Customer Service Performance

1st Call Resolution: **93.93%**
Abandonment Rate: **0.57%**
Avg. Speed of Answer: **17.1 sec**

Claims Performance

Financial Accuracy: **98.25%**
-
90% processed w/in: **7.7 days**
95% processed w/in: **14.8 days**

Claims Performance (Monthly) (December 2023)

90% processed w/in: **6.4 days**
95% processed w/in: **12.4 days**
(Note: This is not a PG metric)

Performance Goals

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

Financial Accuracy: **99%**

Turnaround Time

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





Schools Health Insurance Fund

	Medical Claim 2022-2023	# of EE's 2022-2023	PER EE		Medical Claim 2023-2024	# of EE'S 2023-2024	PER EE
JULY	\$4,771,803.63	3702	\$1,288.97	JULY	\$4,589,904.30	3755	\$1,222.34
AUGUST	\$6,340,351.36	3690	\$1,718.25	AUGUST	\$8,652,996.19	3765	\$2,298.27
SEPTEMBER	\$8,558,419.70	3799	\$2,252.80	SEPTEMBER	\$4,873,056.22	3882	\$1,255.29
OCTOBER	\$6,918,190.88	3810	\$1,815.79	OCTOBER	\$5,985,020.41	3873	\$1,545.31
NOVEMBER	\$6,436,072.00	3808	\$1,690.14	NOVEMBER	\$6,788,857.02	3888	\$1,746.10
DECEMBER	\$7,056,459.00	3820	\$1,847.24	DECEMBER	\$6,076,974.81	3904	\$1,556.60
JANUARY	\$4,390,317.00	3823	\$1,148.39	JANUARY	\$6,076,974.81	3905	\$1,556.20
FEBRUARY	\$8,609,653.34	3836	\$2,244.43	FEBRUARY			
MARCH	\$7,507,694.05	3833	\$1,958.70	MARCH			
APRIL	\$6,322,929.91	3824	\$1,653.48	APRIL			
MAY	\$6,260,801.33	3818	\$1,639.81	MAY			
JUNE	\$9,684,069.81	3819	\$2,535.76	JUNE			
TOTALS	\$82,856,762.01	3798.5	1,776.45	TOTAL	\$43,043,783.76		
AVERAGE		3799	\$1,776.45	AVERAGE		3853.14	\$1,597.16



PLAN SPONSOR INFORMATION SERVICES
Large Claimant Report- Claims Over \$100,000.00

Group: Schools Health Insurance Fund
Paid Dates: 1/1/24- 1/31/24
Network Service ALL

Service Dates: -
Line of Business: All
Product Line: All

Claimant	Relationship	Paid Amount	Diagnosis
1	dependent	\$474,981	Crushing Injury Or Internal Injury
2	employee	\$267,025	Symptoms; Signs; And Ill-Defined Conditions
3	dependent	\$175,765	Liveborn
4	dependent	\$128,373	Other Gastrointestinal Cancer
5	dependent	\$110,592	Hereditary And Degenerative Nervous System Conditions
	Total	\$1,156,736.22	



Schools HIF

Paid Claims 7/1/23-6/30/24

Average payment per member PMPM 7/1/22- 6/30/23	\$610.54
Number of claimants with paid claims over \$100,000 for YTD	47
Total paid on those claimants:	\$8,676,951.05

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 Behavioral Health Visits 2023 YTD:22
Total Medical Visits YTD 2023 : 32
Member Satisfaction YTD: 100%

Provider Network
% Inpatient In- Network: 99.3%
% Professional providers In-Network: 92.2%
% Outpatient providers In-Network- 94.3%

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	80.77%	80.01%	80.22%	78.95%	76.55%	75.07%	76.29%	72.97%	73.13%	71.10%	74.87%	79.30%
ASA	5.74	4.64	6.89	5.79	9.33	10.73	38.09	10.81	4.70	4.28	4.82	4.80
Abandonment Rate	0.58%	0.39%	0.49%	0.27%	0.53%	0.85%	1.88%	0.73%	0.40%	0.42%	0.31%	0.44%
Totals	2023-24 YTD											
Total Inpatient Admissions	263											
Total Inpatient Days	1,232											
Total ER visits	975											



EXPRESS SCRIPTS®

School Health Insurance Fund

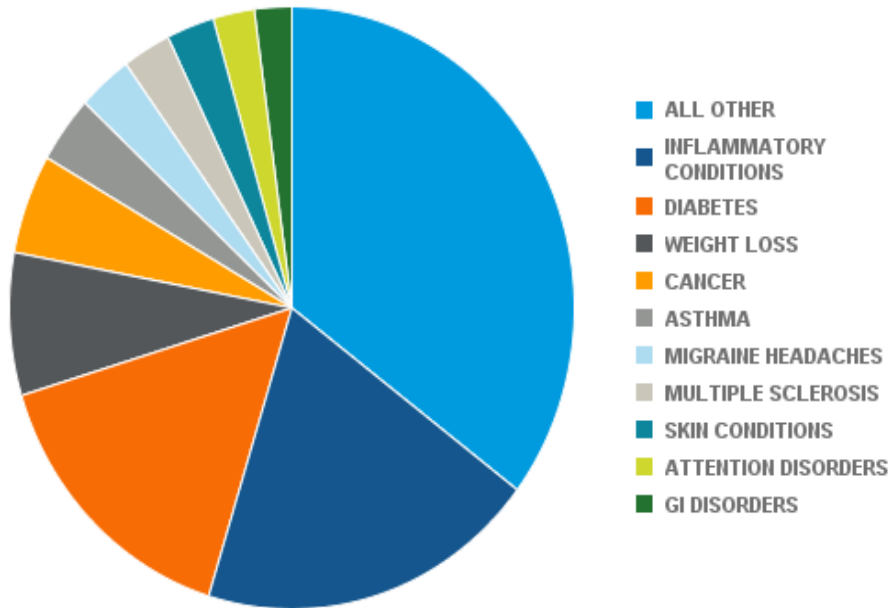
Total Component/Date of Service (Month)	2022 01	2022 02	2022 03	2022 Q1	2022 04	2022 05	2022 06	2022 Q2	2022 07	2022 08	2022 09	2022 Q3	2022 10	2022 11	2022 12	2022 Q4	2022 YTD
Membership	24,262	24,219	24,281	24,254	24,318	24,298	24,294	24,303	26,212	26,482	26,860	26,518	26,909	26,898	26,948	26,918	25,498
Total Days	868,844	799,043	898,775	2,566,662	859,199	896,436	878,460	2,634,095	912,563	973,067	894,829	2,780,459	965,856	960,706	974,957	2,901,519	10,882,735
Total Patients	10,252	9,297	9,884	14,780	10,021	10,288	10,261	15,150	10,676	10,812	10,820	16,152	12,081	12,325	12,087	18,099	23,808
Total Plan Cost	\$3,889,819	\$3,244,281	\$4,009,062	\$11,143,162	\$3,924,495	\$3,802,701	\$4,108,961	\$11,836,157	\$4,113,316	\$4,518,088	\$4,035,775	\$12,667,179	\$4,481,300	\$4,403,702	\$4,359,258	\$13,244,259	\$48,890,757
Generic Fill Rate (GFR) - Total	81.5%	84.1%	86.3%	84.0%	85.8%	85.1%	85.7%	85.5%	84.5%	84.8%	82.7%	84.0%	77.5%	80.5%	83.4%	80.5%	83.3%
Plan Cost PMPM	\$160.33	\$133.96	\$165.11	\$153.15	\$161.38	\$156.50	\$169.13	\$162.34	\$156.92	\$170.61	\$150.25	\$159.23	\$166.54	\$163.72	\$161.77	\$164.01	\$159.78
Total Specialty Plan Cost	\$1,478,566	\$1,228,221	\$1,667,748	\$4,374,535	\$1,467,698	\$1,541,435	\$1,670,976	\$4,680,110	\$1,606,755	\$1,915,374	\$1,687,862	\$5,209,991	\$1,821,186	\$1,864,462	\$1,752,160	\$5,437,808	\$19,702,444
Specialty % of Total Specialty Plan Cost	38.0%	37.9%	41.6%	39.3%	37.4%	40.5%	40.7%	39.5%	39.1%	42.4%	41.8%	41.1%	40.6%	42.3%	40.2%	41.1%	40.3%

Total Component/Date of Service (Month)	2023 01	2023 02	2023 03	2023 Q1	2023 04	2023 05	2023 06	2023 Q3	2023 07	2023 08	2023 09	2023 Q3	2023 10	2023 11	2023 12	2023 Q4	2023 YTD
Membership	26,756	26,737	26,781	26,758	26,854	26,876	26,870	26,867	26,965	27,056	27,556	27,192	27,562	27,578	27,652	27,597	27,104
Total Days	1,009,657	914,090	1,029,445	2,953,192	958,484	1,028,809	984,510	2,971,803	968,891	1,015,008	912,154	2,896,053	1,032,184	1,007,589	1,001,717	3,041,490	11,862,538
Total Patients	11,765	11,190	11,914	17,116	11,277	11,600	11,345	16,599	11,109	11,326	11,059	16,576	12,344	12,234	12,317	18,135	24,125
Total Plan Cost	\$4,580,059	\$4,259,137	\$5,077,135	\$13,916,331	\$4,412,881	\$4,925,614	\$5,194,112	\$14,532,606	\$5,029,964	\$5,173,996	\$4,806,179	\$15,010,140	\$5,589,879	\$5,145,839	\$4,982,005	\$15,717,724	\$59,176,801
Generic Fill Rate (GFR) - Total	84.2%	85.0%	85.5%	84.9%	86.5%	86.6%	86.5%	86.5%	87.0%	86.0%	83.3%	85.4%	80.5%	84.5%	86.5%	83.8%	85.1%
Plan Cost PMPM	\$171.18	\$159.30	\$189.58	\$173.36	\$164.33	\$183.27	\$193.31	\$180.31	\$186.54	\$191.23	\$174.41	\$184.00	\$202.81	\$186.59	\$180.17	\$189.85	\$181.95
% Change Plan Cost PMPM	6.8%	18.9%	14.8%	13.2%	1.8%	17.1%	14.3%	11.1%	18.9%	12.1%	16.1%	15.6%	21.8%	14.0%	11.4%	15.8%	13.9%
Total Specialty Plan Cost	\$1,786,977	\$1,679,465	\$2,048,920	\$5,515,363	\$1,684,353	\$1,963,388	\$2,131,316	\$5,779,058	\$2,183,848	\$2,169,146	\$2,062,309	\$6,415,302	\$2,484,434	\$2,216,414	\$1,984,416	\$6,685,264	\$24,394,987
Specialty % of Total Specialty Plan Cost	39.0%	39.4%	40.4%	39.6%	38.2%	39.9%	41.0%	39.8%	43.4%	41.9%	42.9%	42.7%	44.4%	43.1%	39.8%	42.5%	41.2%

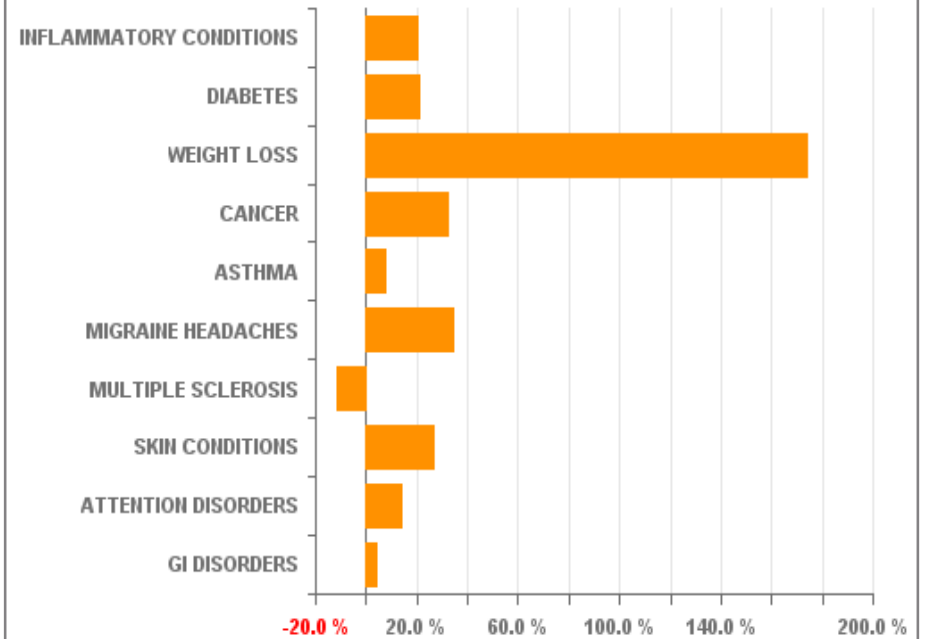
Top Indications

SCHOOL ALLIANCE INS FUND (Current Period 01/2023 - 12/2023 vs. Previous Period 01/2022 - 12/2022) Peer = Commercial

Top Indications by Plan Cost



Plan Cost PMPM % Change (Trend)



			Current Period							Previous Period						Trend
Rank	Peer Rank	Indication	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Plan Cost PMPM	
1	1	INFLAMMATORY CONDITIONS	30.06%	3,707	\$11,505,675	\$35.38	43.4 %	40.2 %	31.78%	3,246	\$9,017,001	\$29.47	43.4 %	42.2 %	20.0 %	
2	2	DIABETES	24.04%	29,149	\$9,200,345	\$28.29	30.5 %	34.7 %	25.19%	26,090	\$7,146,715	\$23.36	31.3 %	38.8 %	21.1%	
3	4	WEIGHT LOSS	11.82%	4,113	\$4,524,663	\$13.91	6.8 %	9.5 %	5.47%	1,624	\$1,552,423	\$5.07	14.1%	22.4 %	174.2 %	
4	3	CANCER	8.26%	1,885	\$3,160,465	\$9.72	88.3 %	75.1%	7.92%	1,526	\$2,246,648	\$7.34	87.9 %	75.4 %	32.3 %	
5	6	ASTHMA	5.58%	19,701	\$2,134,141	\$6.56	73.5 %	77.3 %	6.60%	18,521	\$1,872,225	\$6.12	72.1%	76.0 %	7.2 %	
6	8	MIGRAINE HEADACHES	4.78%	3,533	\$1,829,926	\$5.63	50.8 %	56.3 %	4.53%	3,045	\$1,284,789	\$4.20	54.6 %	61.6 %	34.0 %	
7	7	MULTIPLE SCLEROSIS	4.28%	295	\$1,637,279	\$5.03	36.6 %	42.2 %	6.16%	308	\$1,747,967	\$5.71	29.9 %	33.7 %	-119 %	
8	5	SKIN CONDITIONS	4.23%	6,093	\$1,617,548	\$4.97	87.3 %	88.3 %	4.25%	5,203	\$1,205,792	\$3.94	86.9 %	88.9 %	26.2 %	
9	10	ATTENTION DISORDERS	3.66%	12,658	\$1,399,429	\$4.30	79.0 %	80.6 %	4.07%	11,652	\$1,153,287	\$3.77	79.5 %	81.1%	14.2 %	
10	9	GI DISORDERS	3.30%	2,575	\$1,262,894	\$3.88	51.7 %	62.2 %	4.03%	2,335	\$1,142,307	\$3.73	52.1%	61.5 %	4.0 %	
Total Top 10				83,709	\$38,272,366	\$117.67	54.3 %	57.1 %		73,550	\$28,369,153	\$92.72	56.1 %	60.5 %	26.9 %	

Top Drugs

SCHOOL ALLIANCE INS FUND (Current Period 01/2023 - 12/2023 vs. Previous Period 01/2022 - 12/2022) Peer = Commercial

					Current Period				Previous Period				Change
Rank	Peer Rank	Brand Name	Indication	Specialty Drug	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Plan Cost PMPM
1	7	WEGOVY	WEIGHT LOSS	N	3,135	500	\$3,902,442	\$12.00	530	85	\$667,719	\$2.18	449.8 %
2	1	HUMIRA (CF) PEN	INFLAMMATORY CONDITION	Y	440	54	\$2,636,741	\$8.11	449	52	\$2,493,695	\$8.15	-0.5 %
3	4	STELARA	INFLAMMATORY CONDITION	Y	223	25	\$2,288,006	\$7.03	145	17	\$1,402,786	\$4.58	53.4 %
4	3	OZEMPIC	DIABETES	N	2,240	309	\$1,892,427	\$5.82	1,389	201	\$1,143,503	\$3.74	55.7 %
5	12	SKYRIZI PEN	INFLAMMATORY CONDITION	Y	192	21	\$1,079,047	\$3.32	117	14	\$603,793	\$1.97	68.1 %
6	6	MOUNJARO	DIABETES	N	1,020	146	\$951,680	\$2.93	97	33	\$90,142	\$0.29	893.2 %
7	11	JARDIANCE	DIABETES	N	1,687	178	\$920,374	\$2.83	1,367	155	\$721,362	\$2.36	20.0 %
8	33	HUMALOG	DIABETES	N	1,017	112	\$729,205	\$2.24	895	106	\$659,396	\$2.16	4.0 %
9	14	DUPIXENT PEN	SKIN CONDITIONS	Y	287	39	\$700,205	\$2.15	145	21	\$338,929	\$1.11	94.4 %
10	10	TRULICITY	DIABETES	N	778	94	\$661,967	\$2.04	945	107	\$766,670	\$2.51	-18.8 %
11	37	VYVANSE	ATTENTION DISORDERS	N	1,788	319	\$612,342	\$1.88	1,809	288	\$594,028	\$1.94	-3.0 %
12	18	TREMFYA	INFLAMMATORY CONDITION	Y	115	18	\$604,805	\$1.86	69	9	\$342,201	\$1.12	66.3 %
13	20	TALTZ AUTOINJECTOR	INFLAMMATORY CONDITION	Y	114	17	\$583,670	\$1.79	121	13	\$609,133	\$1.99	-9.9 %
14	23	RINVOQ	INFLAMMATORY CONDITION	Y	109	16	\$540,204	\$1.66	67	7	\$281,671	\$0.92	80.4 %
15	28	OTEZLA	INFLAMMATORY CONDITION	Y	172	22	\$535,590	\$1.65	209	27	\$620,146	\$2.03	-18.7 %
16	41	NURTEC ODT	MIGRAINE HEADACHES	N	383	93	\$512,717	\$1.58	301	62	\$351,965	\$1.15	37.0 %
17	17	FARXIGA	DIABETES	N	927	117	\$484,332	\$1.49	742	95	\$378,939	\$1.24	20.2 %
18	97	SAXENDA	WEIGHT LOSS	N	429	144	\$483,980	\$1.49	706	139	\$843,857	\$2.76	-46.0 %
19	60	UBRELVY	MIGRAINE HEADACHES	N	419	112	\$475,463	\$1.46	286	94	\$282,920	\$0.92	58.1 %
20	15	ENBREL SURECLICK	INFLAMMATORY CONDITION	Y	85	11	\$448,027	\$1.38	71	11	\$323,413	\$1.06	30.3 %
21	27	DUPIXENT SYRINGE	SKIN CONDITIONS	Y	171	26	\$415,047	\$1.28	165	19	\$391,019	\$1.28	-0.1 %
22	53	LENALIDOMIDE	CANCER	Y	25	2	\$376,508	\$1.16	11	2	\$165,663	\$0.54	113.8 %
23	40	HUMIRA PEN	INFLAMMATORY CONDITION	Y	55	7	\$368,660	\$1.13	47	5	\$257,541	\$0.84	34.7 %
24	39	RYBELSUS	DIABETES	N	421	56	\$363,910	\$1.12	362	48	\$301,332	\$0.98	13.6 %
25	106	OMNIPOD 5 G6 PODS (GEN 5)	DIABETES	N	493	53	\$340,450	\$1.05	181	32	\$119,409	\$0.39	168.2 %
Total Top 25					16,725		\$22,907,797	\$70.43	11,226		\$14,751,234	\$48.21	46.1 %

**SCHOOLS HEALTH INSURANCE FUND
CONSENT AGENDA
FEBRUARY 28, 2024**

The following Resolutions listed on the Consent Agenda will be enacted in one motion. Copies of all Resolutions are available to any person upon request. Any Commissioner wishing to remove any Resolution(s) to be voted upon, may do so at this time, and said Resolution(s) will be moved and voted separately.

Resolutions

Subject Matter

Resolution 1-24: 2024-2025 Budget Introduction	Page 52
Resolution 2-24: 2022-2023 Fund Year Audit	Page 53
Resolution 3-24: Joining the HIF Cooperative Pricing System	Page 56
Resolution 4-24: December 2023, January, and February 2024 Bills List	Page 58

RESOLUTION NO. 1-24

**SCHOOLS HEALTH INSURANCE FUND
INTRODUCTION OF THE 2024-2025 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 28, 2024 in Public Session to introduce the proposed budget for 2024-2025 Fund Year; and

BE IT FURTHER RESOLVED that a hearing on this 2024-2025 budget in the amount of \$586,572,422. shall be held at the Fund's regularly scheduled and advertised meeting of March 27, 2024 to be held at the Moorestown Community House at 12:00 pm. This 2024-2025 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 28, 2024

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

RESOLUTION NO. 2-24

**SCHOOLS HEALTH INSURANCE FUND
CERTIFICATION OF THE AUDIT REPORT FOR
PERIOD OF JULY 1, 2022 THROUGH JUNE 30, 2023**

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, 2022 through June 30, 2023 has been filed by the appointed Fund Auditor with the Secretary of the Fund as per the requirements of NJSA 18A:23-1 and NJSA 18A:23-3, 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 Public School Contracts Law, NJSA 18A:18A-1 et seq. effective 6/2/1977, as amended.- 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 Public School Contracts Law, NJSA 18A:18A-1 et seq. effective 6/2/1977, as amended., 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 28, 2024

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 NJSA 18A:23-1 and NJSA 18A:23-3 for the period through June 30, 2023.
- 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. 3-24

**SCHOOLS HEALTH INSURANCE FUND
RESOLUTION FOR MEMBER PARTICIPATION IN THE HEALTH INSURANCE
COOPERATIVE PRICING SYSTEM
A RESOLUTION AUTHORIZING THE
SCHOOLS HEALTH INSURANCE FUND TO ENTER INTO A COOPERATIVE PRICING
AGREEMENT**

WHEREAS, N.J.S.A. 40A:11- 11(5), N.J.S.A. 18A:18A-11 and N.J.A.C. 5:34-7.3 authorizes contracting units to establish a Cooperative Pricing System and to enter into Cooperative Pricing Agreements for its administration; and

WHEREAS, the Southern New Jersey Regional Employee Benefits Fund, hereinafter referred to as the "Lead Agency " has offered voluntary participation in a Cooperative Pricing System for the purchase of third-party claim administration services;

WHEREAS, on February 28, 2024 the Executive Committee of the Schools Health Insurance Fund duly considered participation in the Health Insurance Cooperative Pricing System for the provision and performance of goods and services;

NOW, THEREFORE BE IT RESOLVED as follows:

TITLE

This RESOLUTION shall be known and may be cited as the Cooperative Pricing Resolution of the Health Insurance Cooperative Pricing System

AUTHORITY

Pursuant to the provisions of N.J.S.A.40A: 11-11(5), N.J.S.A. 18A:18A-11and N.J.A.C. 5:34-7.3 the Chairman is hereby authorized to enter into a Cooperative Pricing Agreement with the Lead Agency and to execute and deliver a Joinder Agreement and such other documents as are necessary to confirm membership and participation in the Cooperative Pricing System.

CONTRACTING UNIT

The Lead Agency shall be responsible for complying with the provisions of the local Public Contracts Law (N.J.S.A. 40A:11-1 et seq.) and all other provisions of the revised statutes of the State of New Jersey.

EFFECTIVE DATE

This resolution shall take effect immediately upon passage.

CERTIFICATION

I hereby certify the foregoing to be an original resolution adopted by the Executive Committee of the Schools Health Insurance Fund at a meeting held on February 28, 2024.

ADOPTED: February 28, 2024

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

RESOLUTION NO. 4-24

SCHOOLS HEALTH INSURANCE FUND

**APPROVAL OF THE DECEMBER 2023, JANUARY 2024 AND FEBRUARY 2024 BILLS LIST AND
TREASURERS REPORT**

WHEREAS, the **Schools Health Insurance Fund** (the “Fund”) held a Public Meeting on **February 28, 2024** for the purposes of conducting the official business of the Fund; and

WHEREAS, The Treasurer for the Fund presented bills lists to satisfy outstanding costs incurred for operating the Fund during the months of December 2023, January 2024 and February 2024 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 December 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 2023, January 2024 and February 2024 prepared by the Treasurer of the Fund and duly authorize and concur said bills to be paid expeditiously, in accordance with the laws and regulations promulgated by the State of New Jersey for 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 28, 2024

BY: _____
CHAIRPERSON

ATTEST: _____
SECRETARY

APPENDIX I

**SCHOOLS HEALTH INSURANCE FUND
OPEN MINUTES
November 22, 2023
MOORESTOWN COMMUNITY HOUSE
12:00 PM**

Call to order

ROLL CALL 2023-2024 BOARD OF TRUSTEES

Trustee	BOE		
Joseph Collins	Delsea Regional BOE	Chairman	Absent
Beth Ann Coleman	Collingswood BOE	Secretary	Present
Lisa Giovanelli	Rancocas Valley BOE		Present
Christopher Lessard	Frankford Township BOE		Absent
Evon Digangi	Mount Holly BOE		Present
Nicholas Bice	Burlington Township BOE		Present
Jason Schimpf	Kingsway Regional School District		Present
Helen Haley	Voorhees Township BOE		Absent
Jim Sekelsky	Newton BOE		Present
John Bilodeau	Gloucester Twp BOE		Present
Fran Adler	Clayton BOE		Absent
Katie Blew	North Hunterdon-Voorhees Regional HS		Absent
Derek Jess	Summit BOE		Absent

FUND ADMINISTRATOR:

PERMA Risk Management

Emily Koval, Associate Executive Director

Jordyn DeLorenzo, Assistant Account Manager

PROGRAM MANAGER:

Conner Strong & Buckelew

Crystal Bailey, Program Manager

FUND ATTORNEY:

Ken Harris

FUND TREASURER:

Lorraine Verrill

FUND ACTUARY:

Absent

FUND AUDITOR:

Absent

MEDICAL TPA AMERIHEALTH:

Tracey Maloney

MEDICAL TPA AETNA:

Jason Silverstein

MEDICAL TPA HORIZON:

Michelle Witherspoon

EXPRESS SCRIPTS: Charles Yuk

DELTA DENTAL Absent

GUARDIAN NURSES: Andrea Spector

MOTION TO APPROVE OPEN MINUTES OF September 27, 2023

Moved: Commissioner Giovanelli
Second: Commissioner DiGangi
Vote: Unanimous

MOTION TO OPEN THE MEETING TO THE PUBLIC FOR AGENDA ITEMS ONLY

Moved: Commissioner DiGangi
Second: Commissioner Giovanelli
Vote: Unanimous

MOTION TO CLOSE THE MEETING TO THE PUBLIC FOR AGENDA ITEMS ONLY

Moved: Commissioner DiGangi
Second: Commissioner Bilodeau
Vote: Unanimous

EXECUTIVE DIRECTORS REPORT

Fast Track Financial Reports – Ms. Koval said that August and September financials are included in the agenda. She stated that there was an IBNR adjustment that is reflective in the financials. She stated that for the summer months there is an uptick in utilization which always makes the end of summer claims higher than usual.

2022-2023 SHIF DRAFT AUDIT

Mr. Dennis Skalkowski reviewed the Audit draft report of the 2022-2023 Fund Year. He stated that this draft includes no findings or recommendations. The Auditors will complete their testing and present the final audit to the finance committee prior to December 31. Once approved, the audit will be filed, and ratification of the report can take place at the February meeting.

MOTION TO ALLOW THE FINANCE COMMITTEE TO REVIEW AND APPROVE THE FINAL 2022-2023 SHIF AUDIT REPORT FOR STATE FILING AND RATIFY WITH THE EXECUTIVE COMMITTEE AT THE FEBRUARY 28, 2024 SHIF MEETING.

Moved: Commissioner DiGangi
Second: Commissioner Sekelsky
Vote: Unanimous

MEDICAL TPA RFPs

Mrs. Koval stated that the Schools HIF had 3 Medical TPA RFPs that closed on September 21, 2023. The contract terms are all for 1-year, January 1, 2024- December 31, 2024.

- 1) Aetna Population
- 2) AmeriHealth Population
- 3) Horizon Omnia Population

Enclosed is a memo in Appendix II that was sent to the Contracts Committee for review and consideration. The committee agreed to the recommendations of renewing all contracts with the incumbent Carriers.

Resolution 33-23 in consent agenda award the 1-year contracts.

LEVEL Rx MARKET CHECK - On behalf of the Local Funds, and the result of an RFP, the MRHIF entered the Level Rx coalition, administered by Express Scripts, at the end of 2021. As of November 2023, Level Rx represents 800,000 prescription lives (subscribers + dependents).

One of the contract terms requires an annual Market Check, in which the Coalition on behalf of its members negotiates with Express Scripts to get the best in market pricing available or will be required to go out to RFP for administrator. The 2024 market check has just completed, and the Coalition was successful in improving pricing for its membership. The Level Rx program continues to perform very well and continues to delivery year over year improved pricing and increased dividends.

Milliman, Level Rx's Actuary estimates the overall contract improvement to be -2.4%. This is made up of increased prescription discount costs and increased rebates.

2024-2025 BUDGET UPDATE - Mrs. Koval stated that the 2024-2025 budget process will begin soon. Data through November 30 will be evaluated, and we can decide if December data should also be included. The timeline should be consistent with prior years having rates available to the membership mid-February.

2023-2024 MEETING DATES - Revised Resolution 16-23 updates the meeting location to Moorestown Community House for the remainder of the Fund Year.

MOTION TO APPROVE RESOLUTION 33-23 & REVISED REOLUTION 16-23

Moved:	Commissioner DiGangi
Second:	Commissioner Giovanelli
Vote:	Unanimous

PROGRAM MANAGER'S REPORT

Mrs. Bailey reviewed the following Program Manager agenda items:

COVERAGE UPDATES:

Aetna/South Jersey Radiology Negotiations – Aetna and South Jersey Radiology have finalized their negotiations and have reached an agreement effective December 1, 2023. South Jersey Radiology will

remain a participating provider for Aetna. Aetna will mail rescind letters to members who received notification of the pending termination.

EXPRESS-SCRIPTS UPDATE

CMS Annual Open Enrollment period for the 2024 plan year is October 15 – December 7. ESI has begun gathering information needed for their annual mailing campaign for the 2024 Notice of Creditable Coverage (NOCC). To meet the CMS requirement, Express Scripts will mail the NOCC letters the week of September 18th to those age 65 and older enrolled in ESI coverage through the HIFs. The Program Manager team has provided ESI with an updated letter template for the new plan year in preparation of the mailing.

The Program Manager visited Express Scripts headquarters and mail order facility in St. Louis, MO. ESI provided details on their continuous efforts to provide appropriate programs based on the ever-changing pharmacy market. They shared their overall format for implementing pilot programs and how they review individual customers data to determine how their customers can be better served. ESI's mail order facility regulated by the government compliance guidelines represented impressive efficiencies within their entire process. Their current accuracy rate is over 98% resulting in 2% of the total prescriptions filled in a day needing to be quality reviewed by their 24-hour on-site pharmacists.

OPERATIONAL UPDATES: None

2023 LEGISLATIVE REVIEW

FREE COVID-19 At-HomeTest – Effective November 20, 2023, free COVID-19 at home test kits are available for reorder from the government. Every U.S. household is eligible to order 4 free COVID-19 at home tests. <https://www.covid.gov/tests>

Gag Clause Prohibition Compliance Attestation – Beginning December 2023, health insurance issuers and self-funded (ASO) or partially self-funded group health plans are required to submit an annual Gag Clause Prohibition Compliance Attestation (GCPCA) per the requirements established by the 2021 Consolidated Appropriations Act (CAA 2021). A gag clause is a “contractual term that directly or indirectly restricts specific data and information that a plan or issuer can make available to another party.” The CAA 2021 prohibits “gag clauses” under group health plan (GHP) agreements. The first attestation is due by December 31, 2023. The submission covers the period beginning December 27, 2020 through the date of the attestation, September 21, 2023. Subsequent attestations are due each December 31. The attestation was submitted by the Program Manager on September 21, 2023, for all groups with medical and/or prescription coverage in the SHIF. Groups do not need to take any additional action unless they do not have medical or prescription coverage in the SHIF.

Medical and Rx Reporting: None

No Surprise Billing and Transparency – Continued Delays

Appeals

Carrier Appeals

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
9/12/2023	Medical/Aetna	SHIF 2023-09-03	Wellness Visit	Overtured	9/13/2023
9/12/2023	Medical/Aetna	SHIF 2023-09-04	Continuation of inpatient Stay	Upheld	9/12/2023
6/5/2023	Medical/Aetna	SHIF 2023-09-05	Proton beam therapy denial	Upheld	7/20/2023
8/21/2023	Medical/Aetna	SHIF 2023-10-01	Skilled Nursing Facility Room and Board	Upheld	8/22/2023
8/23/2023	Medical/Aetna	SHIF 2023-10-02	Denial of lab testing	Upheld	8/31/2023
10/25/2023	Medical/Aetna	SHIF 2023-10-03	Denial of Assistant Surgeon	Under Review	N/A
9/21/2023	Medical/Aetna	SHIF 2023-10-05	Denial of MRI	Upheld	9/29/2023
9/28/2023	Medical/Aetna	SHIF 2023-10-06	Denial of MRI	Upheld	10/11/2023
11/7/2023	Medical/Aetna	SHIF 2023-11-01	Out of Network Anesthesia	Upheld	11/7/2023
11/7/2023	Medical/Aetna	SHIF 2023-11-02	Out of Network Anesthesia	Upheld	11/7/2023
10/6/2023	Medical/Aetna	SHIF 2023-11-03	Denied Surgical Services	Upheld	10/13/2023
10/17/2023	Medical/Aetna	SHIF 2023-11-04	Denied Surgical Services	Upheld	11/1/2023
6/26/2023	Medical/Aetna	SHIF 2023-11-05	Investigationa l Lab Testing	Upheld	7/3/2023
11/15/2023	Medical/Aetna	SHIF 2023-11-06	Prosthetic services	Under Review	N/A

IRO Submissions:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
9/15/2023	Medical/Aetna	SHIF 2023-09-04	Continuation of inpatient stay	Upheld	9/29/2023
9/20/2023	Medical/Aetna	SHIF 2023-09-05	Proton beam therapy denial	Overtured	10/3/2023
10/3/2023	Medical/Aetna	SHIF 2023-10-01	Skilled Nursing Facility Room and Board	Upheld	10/9/2023

10/10/2023	Medical/Aetna	SHIF 2023-10-02	Denial of lab testing	Upheld	10/30/2023
10/30/2023	Medical/Aetna	SHIF 2023-10-05	Denial of MRI	Upheld	11/3/2023
10/31/2023	Medical/Aetna	SHIF 2023-10-06	Denial of MRI	Under Review	N/A
11/7/2023	Medical/Aetna	SHIF 2023-11-03	Denied Surgical Services	Overtured	11/9/2023
11/10/2023	Medical/Aetna	SHIF 2023-11-04	Denied Surgical Services	Upheld	11/14/2023
11/13/2023	Medical/Aetna	SHIF 2023-11-05	Investigational Lab Testing	Under Review	N/A

Small Claim Committee Appeals:

Submission Date	Appeal Type	Reason	Determination	Determination Date
11/14/2023	Qualifying Life Event	Addition of newborn beyond 60 days allowed	Overtured	11/14/2023

Mrs. Bailey made a reminder about enrolling dependents as well as any plan changes are done in a timely manner. She stated there has been an uptick in late enrollments and added members during life qualifying events. She asked that Commissioners and brokers please remind their HR representative.

ARTEMIS Mrs. Bailey reviewed the Artemis reporting that was handed out at the meeting for Avoidable ER Costs. She stated there are many zero dollar copay options that are available for all members. She stated that there is out of pocket savings as well as plan costs savings. The report shows the utilization of ER spend that could have been handled at an urgent care or a minute clinic.

GUARDIAN NURSES ("GN") – Repetitive from Guardian Nurses reviewed the report included in the agenda. She reviewed the total referrals, engagements and high claimants and utilization of the program as a whole.

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

MOTION TO APPROVE RESOLUTION 34-23 APPROVING THE OCTOBER AND NOVEMBER 2023 BILLS LIST AND TREASURERS REPORT

Moved:	Commissioner Adler
Second:	Commissioner Bilodeau
Vote:	Unanimous

FUND ATTORNEY – Fund Attorney stated that legislators are attempting to put into play what they call “cooperative purchasing systems”. He stated that JIFs and HIFs are already have a cooperative purchasing structure.

AETNA – Mr. Silverstein reviewed the claims report for the Month of August, September and October 2023. He stated there were 11 high-cost claimants for the month of August, 12 for the month of September, and 13 for the month of October over the threshold of \$100,000. He stated that all dashboard metrics continue to preform well.

AMERIHEALTH – Ms. Strain reviewed the report through October 2023. She stated that there were 2 high-cost claimants for the month of October over the threshold of \$100,000. She reviewed the dashboard metrics. She stated that MD Live is moving to Teladoc. She stated that there will be updates on the website with links for easy access starting January 1.

HORIZON- A representative from Horizon stated that there was one high cost claimant – claims are stable and costs appear to continue with trend.

EXPRESS SCRIPTS – Mrs. Patel reviewed the report provided in the agenda for the month of October. She reviewed the top indications that are utilized in the fund. She also reviewed the Top Drugs. She stated that this is a trend statewide seeing weight loss and diabetes drugs trending high.

DELTA – No report

OLD BUSINESS – None.

NEW BUSINESS – None

PUBLIC COMMENT – None

MOTION TO ADJOURN:

MOTION:	Commissioner Giovanelli
SECOND:	Commissioner Adler
VOTE:	Unanimous

MEETING ADJOURNED: 12:41 pm

NEXT MEETING: February 28, 2024
Moorestown Community House
12:00pm

APPENDIX II

Anti-Diabetic Drugs Impact on Pharmacy Costs

This report compares the prior period of December 2021 through November 2022 to the current period of December 2022 through November 2023. These are the periods which contain the full input of prior health claims into the Artemis Reporting System. The goal of this report is to show the impact of anti-diabetic drugs on the total pharmacy costs of the Schools' Health Insurance Fund (SHIF).

In the current period, the anti-diabetic drug group has the second highest cost of employer paid prescriptions, as well as the second highest average cost per claimant paid by the SHIF. However, of the top five most costly drug groups in the SHIF, anti-diabetic drugs have second least number of claimants, with the only drug group with fewer being antineoplastics and adjunctive therapies, which are used for the treatment of cancer. This data shows that the population of the SHIF that uses anti-diabetic drugs is quite small, but the costs of these drugs are higher compared to the other costly drugs being paid for by the SHIF. **(Exhibit 1)**

A possible solution to the high costs of anti-diabetic drugs is to review the costs of the current anti-diabetic drugs being taken in relation to replacement treatments that are available. There was potentially \$281,592 in lost savings based on replacement treatments not being used. A change in the release mechanism and therapeutic substitution are the two treatments that are being under utilized and would provide the most savings. We encourage groups to provide their employees with consistent communications relating to adherence and alternative treatments drugs available. By having members consult their providers and learn about these alternative treatments, the SHIF could begin to see a significant savings throughout the year. **(Exhibit 2)**

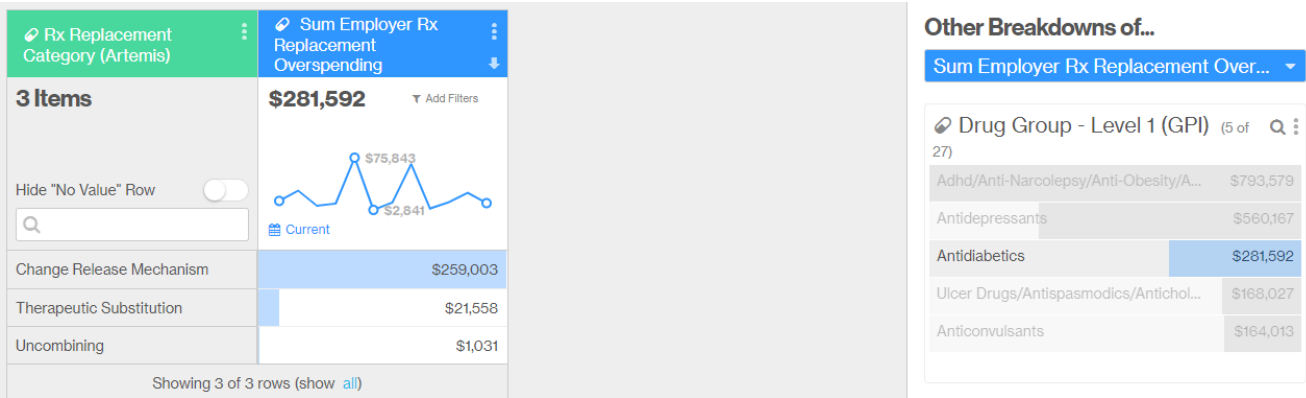
Given the data provided, the SHIF should educate and encourage members who have a diabetic diagnosis, or are pre-diabetic, to speak with their providers and explore treatments that can be an alternative to anti-diabetic drugs. Since anti-diabetic drugs are the highest cost to the SHIF's pharmacy spending and have a low number of claimants, relative to other high-cost drug groups, if a small portion of members switch to an alternative treatment, the SHIF will experience significant savings.

Exhibit 1

Top 5 Drug Groups by Employer Paid Rx

Drug Group - Level 1 (GPI)	Claimants	Employer Paid Rx	Avg Cost Per Claimant	Percent of Total Employer Paid Rx	Percent of Total Scripts
dermatologicals	6237	\$8,114,750	\$1,301	14%	5%
antidiabetics	1407	\$7,969,605	\$5,664	14%	4%
adhd/anti-narcolepsy/anti-obesity/anore...	2213	\$5,873,503	\$2,654	10%	5%
analgesics - anti-inflammatory	3648	\$5,586,686	\$1,531	10%	2%
antineoplastics and adjunctive therapies	358	\$2,801,499	\$7,825	5%	<1%

Exhibit 2



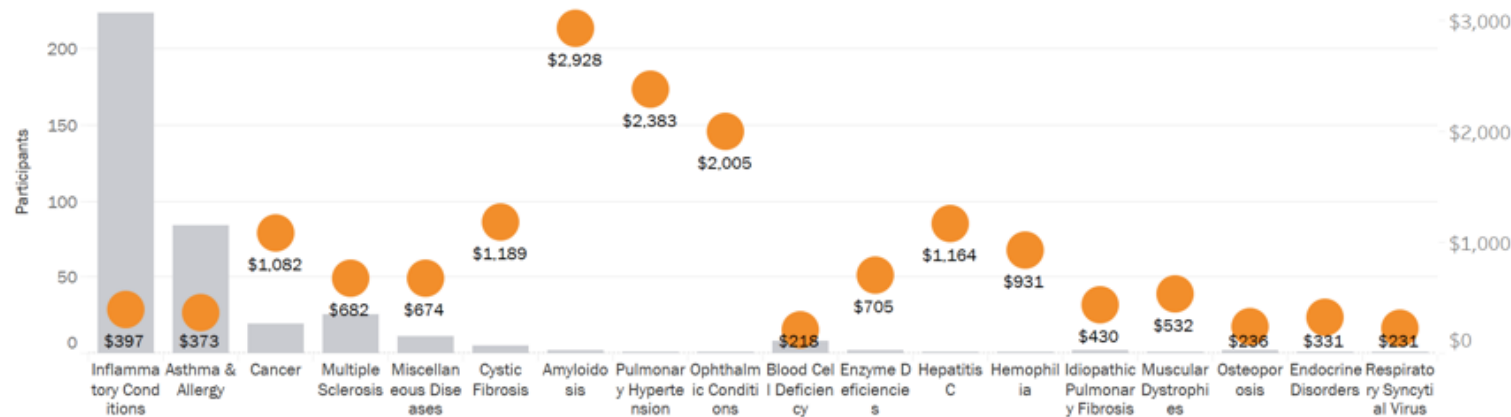
Schools Health Insurance Fund Savings Report

Claims with Dates of Service 2023-01-01 - 2023-12-31



Therapeutic Category	Adjudicated Amount	Participant Savings	Total Tertiary	Net Savings 75%	\$ Save per Claim	Claim Count	Participants	\$ Save PPPM (DOS)
Grand Total	\$4,801,871	\$26,973	\$1,720,798	\$2,290,574	\$1,075	2,130	393	\$486
Inflammatory Conditions	\$2,619,257	\$11,977	\$1,185,051	\$1,066,672	\$936	1,139	224	\$397
Hepatitis C	\$20,320	\$60	\$1,630	\$13,973	\$4,658	3	1	\$1,164
Hemophilia	\$18,326	\$100	\$3,326	\$11,175	\$860	13	1	\$931
Amyloidosis	\$96,438	\$340	\$2,401	\$70,273	\$3,514	20	2	\$2,928
Asthma & Allergy	\$603,285	\$8,320	\$93,311	\$376,241	\$757	497	84	\$373
Blood Cell Deficiency	\$28,222	\$360	\$0	\$20,896	\$836	25	8	\$218
Cancer	\$464,446	\$1,700	\$116,552	\$259,646	\$1,664	156	20	\$1,082
Cystic Fibrosis	\$224,557	\$480	\$128,956	\$71,340	\$1,928	37	5	\$1,189
Endocrine Disorders	\$5,314	\$20	\$0	\$3,971	\$3,971	1	1	\$331
Enzyme Deficiencies	\$25,351	\$60	\$2,728	\$16,922	\$1,880	9	2	\$705
Idiopathic Pulmonary Fibrosis	\$20,638	\$80	\$6,793	\$10,324	\$1,475	7	2	\$430
Miscellaneous Diseases	\$133,009	\$1,010	\$13,321	\$89,008	\$1,459	61	11	\$674
Multiple Sclerosis	\$389,519	\$1,966	\$104,012	\$212,655	\$1,787	119	26	\$682
Muscular Dystrophies	\$12,107	\$40	\$3,561	\$6,379	\$1,063	6	1	\$532
Ophthalmic Conditions	\$32,153	\$80	\$0	\$24,055	\$6,014	4	1	\$2,005
Osteoporosis	\$7,713	\$140	\$12	\$5,671	\$810	7	2	\$236
Pulmonary Hypertension	\$97,479	\$200	\$59,145	\$28,601	\$1,192	24	1	\$2,383
Respiratory Syncytial Virus	\$3,738	\$40	\$0	\$2,773	\$1,387	2	1	\$231

Participant Count vs. \$ Save Per Participant Per Month (PPPM)



*PPPM - Per Participant Per Month

SaveOnSP | HIGHLY CONFIDENTIAL | January 30, 2024

Net Save by Drug



Therapeutic Category	Drug Name	Net Savings 75%	Participants	
Inflammatory Conditions	Humira	\$215,055.23	66	■
	Stelara	\$129,425.23	24	■
	Taltz	\$119,711.92	24	■
	Skyrizi	\$101,117.35	25	■
	Otezla	\$98,318.13	22	■
	Enbrel	\$83,175.85	17	■
	Tremfya	\$76,511.15	17	■
	Rinvoq	\$58,185.29	16	■
	Xeljanz	\$53,272.35	6	■
	Cosentyx	\$37,109.55	5	■
	Cimzia	\$20,608.49	3	■
	Olumiant	\$18,367.05	4	■
	Siliq	\$11,521.47	1	■
	Actemra	\$10,221.27	3	■
	Kevzara	\$8,044.58	1	■
	Benlysta	\$7,569.17	2	■
	Tavneos	\$5,595.00	1	■
	Kineret	\$3,638.21	1	■
	Inflectra	\$3,605.10	1	■
	Simponi	\$3,136.26	2	■
	Sotyktu	\$2,483.22	1	■
Multiple Sclerosis	Kesimpta	\$60,222.00	5	■
	Vumerity	\$42,010.86	5	■
	Copaxone	\$24,777.18	5	■
	Zeposia	\$24,109.35	4	■
	Glatiramer Acetate	\$21,315.17	5	■
	Ponvory	\$14,432.69	1	■
	Gilenya	\$12,338.04	1	■
	Plegridy	\$7,440.00	1	■
	Glatopa	\$4,215.15	1	■
	Aubagio	\$1,795.03	1	■
Hepatitis C	Epclusa	\$13,972.50	1	■
Hemophilia	Hemlibra	\$11,175.00	1	■

Therapeutic Category	Drug Name	Net Savings 75%	Participants	
Cancer	Tagrisso	\$38,820.00	2	■
	Imbruvica	\$28,262.62	2	■
	Venclexta	\$25,519.84	2	■
	Bosulif	\$25,410.00	2	■
	Copiktra	\$18,690.00	1	■
	Alecensa	\$18,660.00	1	■
	Xalkori	\$18,536.12	1	■
	Stivarga	\$15,548.10	1	■
	Tasigna	\$11,205.00	1	■
	Alunbrig	\$11,051.18	1	■
	Kisqali	\$9,969.35	1	■
	Lenvima	\$7,470.00	1	■
	Triptodur	\$7,470.00	1	■
	Brukina	\$6,776.04	1	■
	Sprycel	\$5,675.78	1	■
	Lonsurf	\$5,102.06	1	■
	Revlimid	\$3,823.57	1	■
	Orgovyx	\$1,656.20	1	■
	Verzenio	\$0.00	1	■

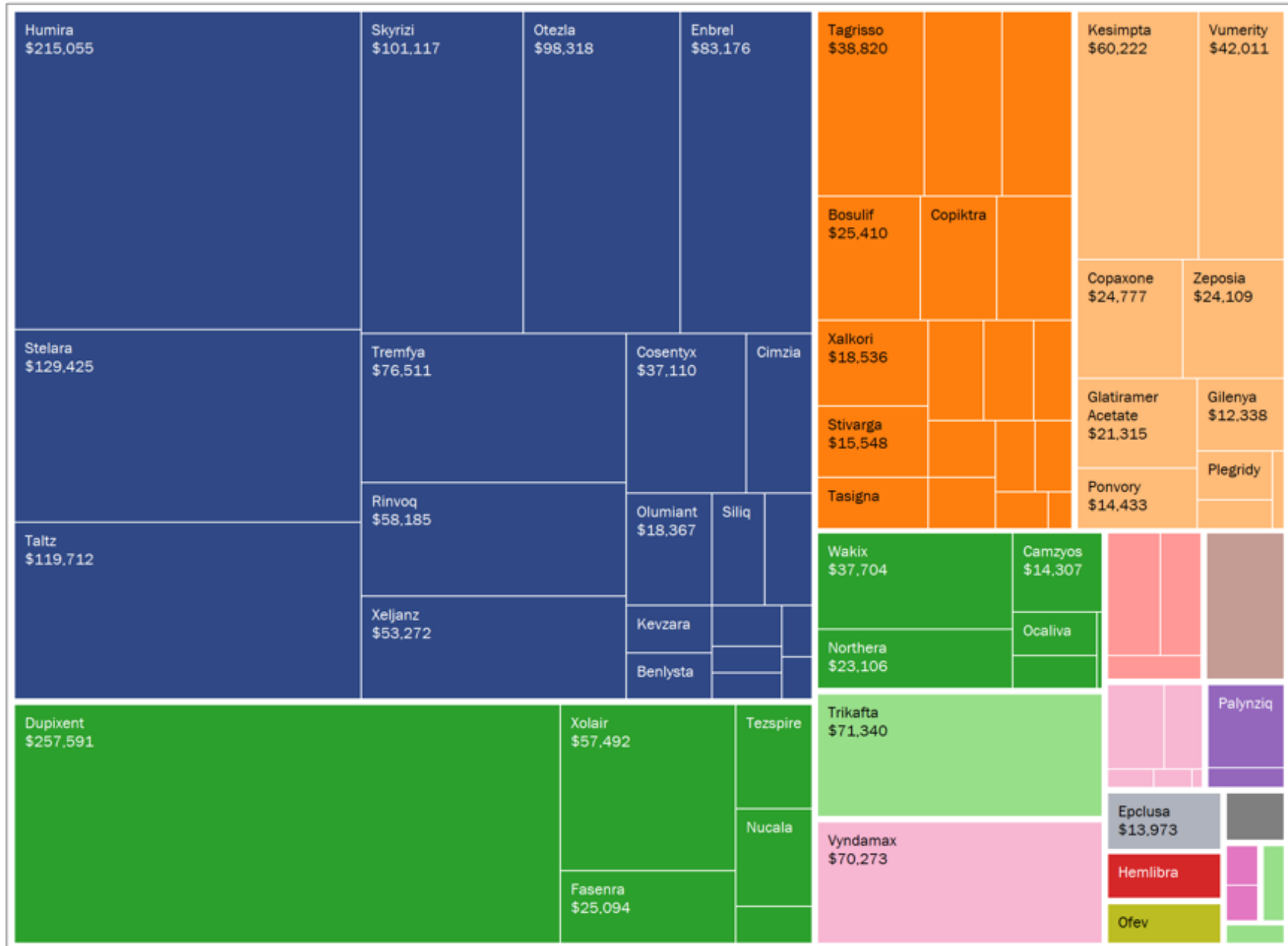
Net Save by Drug



Therapeutic Category	Drug Name	Net Savings 75%	Participants	
Cystic Fibrosis	Trikafta	\$71,340.42	5	
Pulmonary Hypertension	Uptravi	\$13,310.25	1	
	Adempas	\$10,581.72	1	
	Opsumit	\$4,708.72	1	
Blood Cell Deficiency	Promacta	\$10,331.81	1	
	Zarxio	\$6,859.96	3	
	Nyvepria	\$1,771.58	1	
	Nivistym	\$1,522.38	1	
	Fulphila	\$410.54	2	
Enzyme Deficiencies	Palynziq	\$13,620.00	1	
	Kuvan	\$3,301.95	1	
Muscular Dystrophies	Radicava	\$6,379.48	1	
Endocrine Disorders	JYNARQUE	\$3,970.63	1	

Therapeutic Category	Drug Name	Net Savings 75%	Participants	
Asthma & Allergy	Dupixent	\$257,590.58	59	
	Xolair	\$57,492.50	13	
	Fasenra	\$25,093.88	5	
	Tezspire	\$15,715.46	5	
	Nucala	\$14,707.79	3	
	Adbry	\$5,640.68	2	
Miscellaneous Diseases	Wakix	\$37,703.98	3	
	Northra	\$23,105.85	1	
	Camzyos	\$14,307.19	1	
	Ocaliva	\$7,425.00	1	
	Vivitrol	\$5,601.47	4	
	Sublocade	\$864.99	1	
Amyloidosis	Vyndamax	\$70,272.69	2	
Ophthalmic Conditions	Oxervate	\$24,054.66	1	
Idiopathic Pulmonary Fibrosis	Ofev	\$10,323.79	2	
Osteoporosis	Tymlos	\$2,987.28	1	
	Forteo	\$2,683.32	1	
Respiratory Syncytial Virus	Synagis	\$2,773.26	1	

Net Save by Drug



Savings Report: Definition of Terms

(includes only claims invoiced through the SaveonSP program during the reporting period)

Adjudicated Amount: Total copay the prescription adjudicated for with Express Scripts, and therefore, amount billed to the manufacturer's copay assistance program.

Participant: Patient enrolled in SaveonSP program with a claim filled during the reporting time period

Participant Savings: Average member copay prior to SaveonSP program implementation

Total Tertiary: Used for residual member cost after copay assistance pays (\$5-\$50 generally), member's 13th fill in the year, or pass through copays

Gross Savings: Adjudicated Amount Minus Credit for Prior Copay Minus Tertiary remaining balance Minus Residual Tertiary

Net Savings: Gross Savings x 75%

Carrier Number: K8CA

APPENDIX III

February 15, 2024

TO: ATTORNEYS for: CJHIF, Gateway BMED Fund, Metro HIF, NJMEBF, Southern Coastal HIF
SHIF Fund Contracts Committee

FROM: J. Kenneth Harris **J. Kenneth Harris**

CC: Brandon Lodics, Emily Koval, Diane Peterson

Subject: TPA Contract Process – A New Approach

Executive Summary: In July 2023 the Office of the State Comptroller prevented the MRHIF from doing a group/collective RFP for TPA services for all HIF members of the MRHIF. The OSC had three primary reasons for blocking the proposed RFP: (1) the MRHIF did not have authority to issue a procurement for TPA services for the member HIFs;

(2) the MRHIF could not issue a contract to more than one TPA; and (3) the proposal of a HIF wide TPA RFP was a type of pool or cooperative purchasing system which the MRHIF was not authorized to conduct.

The advantage of conducting the RFP at the MRHIF level was twofold:

- (1) We could aggregate all of the lives of covered members and thereby negotiate better rates; and
- (2) it significantly reduces the amount of paperwork that would otherwise be associated with each individual HIF conducting its own RFP process.

In December 2023, I did an extensive review of both the Local Public Contracts Law and the Public School Contracts Law, as well as the relevant regulations, to determine how it would be possible to remove the OSC objections to having an all-inclusive TPA RFP for all member HIFs of the MRHIF. A detailed Memorandum (see the below text) was circulated among the Executive Director and Program Manager personnel and, as a result, the concept of creating a cooperative pricing system, as authorized by NJAC 5:34-7.1, with the SNJ Fund as the Lead Agency was developed.

During the Executive Committee meeting of the MRHIF on February 15, 2024, following a briefing by the Executive Director and the MRHIF attorney (the author of this memo) the formation of a cooperative pricing system was approved. The purpose of this memo is to explain the process for forming the “Health Insurance Cooperative Pricing System” for all member HIFs of the MRHIF, to designate the SNJ Fund as the lead agency and to request the approval and membership of the HIFs represented by the attorneys receiving this memo. The Contracts Committee of the SHIF is also copied as their attorney is already aware of this proposal. Below you will find a more detailed discussion of the process. Should you recommend that the HIFs that you

represent join the Health Insurance Cooperative Pricing System ("HICPS"), sample resolutions, HICPS Agreement and joinder agreement are attached.

Summary of Recommendation: Use the existing statute and regulations to have all of the regional HIFs enter into a cooperative purchasing system which allows the "lead agency" to act for any or all of the parties in exercising the purchasing function. When this concept was first considered, the MRHIF was to be used as the "lead agency" issuing and evaluating the RFPs. Based on the language of the statute which talks in terms of the contract fulfilling the needs of the lead agency and the member entities, one of the regional HIFs should be the lead agency as compared to the MRHIF since it does not use TPA services. An issue to be considered is the requirement that all registered members of the joint purchasing group get the same pricing from the vendor (See NJAC 5:34-7.10 at page 6). It is my understanding that when, as an example, Aetna quotes their TPA services, the cost is consistent throughout their network service area although the provider reimbursement can vary based on location and other factors. If that is correct, then this should not be a hurdle.

A joint purchasing system is limited to a 5-year term but can be renewed for additional 5-year terms.

The lead agency will have significant administrative responsibilities along with financial accounting and reporting requirements. (See NJAC 5:34-7.9 page 5; NJAC 5:34-7.11 page 8 and NJAC 5:34-7.14 page 8)

Background and Analysis: HIFs, whether composed of municipalities, fire districts, authorities or boards of education are subject to the Local Public Contracts Law ("LPCL") or the Public School Contracts Law ("PSCL"). Both the LPCL and PSCL provide for local units to enter into joint purchasing agreements for goods and services (NJSA 40A:11-10 & NJSA 18A:18A-11).

There are administrative regulations, NJAC 5:34-7 et seq. which apply to all "contracting units" subject to both the LPCL and PSCL. A "contracting unit" means any county; municipality; board of education; units of local government as well as HIFs.

"Joint purchasing system" means a cooperative purchasing system in which the lead agency serves as the purchasing agent for the membership of the system with all of the duties and responsibilities attendant thereto. The lead agency advertises for bids and awards a single contract to a vendor providing for the payment to the contractor for its own needs and for the needs of the participating registered members of the system. The only contractual relationship is between the lead agency and the vendor. It is due to this definition that I am recommending that one of the regional HIFs, e.g. the SNJ Fund, be the lead agency. The MRHIF does not have any reason for a contract with a TPA, at least based on its current function/role with its member HIFs. The SNJ Fund utilizes all of the TPA networks, inclusive of Medicare Advantage Plans, so it fits the lead agency definition.

One potential issue is the phrase "awards a single contract to a vendor". The OSC focused on "a vendor" to argue that the MRHIF could not contract with multiple TPAs. We sidestepped this issue by doing RFPs that said match a named demographic/network profile and awarding separate contracts based on the profile.

There are different forms for a joint purchasing system and I am recommending forming a cooperative pricing system as that form best suited the objectives we are trying to achieve.

Definitions:

"Cooperative pricing system" means a purchasing system in which a local contracting unit advertises for bids and awards a master contract to a successful vendor for its own quantities and the estimated quantities submitted by the individual registered members.

"Cooperative purchasing system" means a cooperative pricing system, joint purchasing system, commodity resale system, county cooperative contract purchasing system or regional cooperative pricing system which has been approved and registered pursuant to this subchapter.

"Lead agency" means the contracting unit which is responsible for the management of the cooperative purchasing system. Other than a commonality of interest in the subject matter of the contract, there is no required relationship between the lead agency and the members of the joint purchasing system other than the contractual relationship of entering into the joint purchasing system agreement and proper registration.

"Joint purchasing system" means a cooperative purchasing system in which the lead agency serves as the purchasing agent for the membership of the system with all of the duties and responsibilities attendant thereto. The lead agency advertises for bids and awards a single contract to a vendor providing for the payment to the contractor for its own needs and for the needs of the participating registered members of the system. The only contractual relationship is between the lead agency and the vendor.

"Registered member" means a contracting unit which has been approved by the Director (of the Division of Local Government Services) for participation in a cooperative purchasing system. The Director has 45 days from receipt of the completed application to approve or reject the application. If no action is taken within 45 days, it is deemed to be approved.

In order to form a cooperative pricing system, the member entities must adopt a resolution to participate in the system and then the lead agency must file with the Division of Local Government Services for approval by filing "Form CP-2001" a Request For Registration Or Modification of a Cooperative Purchasing System which contains the following information: action requested; name of cooperative pricing system; name of contact, address, and phone number of lead agency; name of participating contracting units affected by request; and certification of compliance with N.J.S.A. 40A:11-1 et seq. and 18A:18A-1 et seq., as appropriate.

Once registered with the DLGS, the lead agency would be able to issue the RFP for TPA services for all the member HIFs.

The following are the steps necessary to form a joint purchasing system and the related tasks involved in its operation:

5:34-7.3 Cooperative pricing system or joint purchasing system creation

(a) Two or more contracting units may join together to form a cooperative pricing system or a joint purchasing system for the provision and performance of goods and services.

(b) The contracting unit designated as the lead agency shall authorize the creation of the system by resolution. The authorizing resolution shall identify the system established as either a joint purchasing system or a cooperative pricing system.

(c) Motions made, carried, and recorded in the written minutes of a business meeting of a board of education shall be considered to be the same as a resolution.

5:34-7.4 Cooperative pricing system or joint purchasing system formal agreement

(a) A cooperative pricing system or joint purchasing system shall be based on a formal agreement entered into between the lead agency and each contracting unit. Each agreement shall be authorized by resolution.

(b) At a minimum, the formal agreement shall include the following: 1. Reference to the authorizing statute;

2. Identification of the type of purchasing system;
3. Description of the items of the goods and services to be purchased;
4. The manner of advertising for bids and of awarding contracts
5. Clear and specific assignment of responsibilities, duties and rights of all contracting units;
6. Provision for any sharing of administrative costs and/or payment for goods and services purchased, together with any necessary standards of performance;
7. Length of the agreement not to exceed 5 years pursuant to N.J.A.C. 5:34-7.5(f);
8. The name of the lead agency for the system: i. As an option, the responsibility of serving as lead agency may rotate, at the most once a year, among the registered members. Provision for this rotation shall be included in the agreement;
 - ii. Rotation of lead agency responsibilities among registered members shall not invalidate contracts or purchase orders with contractors that are in effect at the time of rotation;
 - iii. The Director shall be notified in writing within 30 days of any change in the lead agency; and
9. A requirement that the system identifier shall appear on all documentation related to purchases made through the system, including bidding documents, purchase orders, vouchers, contracts and records.

5:34-7.5 Cooperative pricing system or joint purchasing system registration

- (a) A cooperative pricing system or joint purchasing system shall be subject to registration with and approval by the Director.
- (b) The lead agency of a proposed system shall apply to the Director on behalf of the system's participating contracting units.
- (c) Applications shall be made on Form CP-2001.
- (d) The Director shall act upon the application within the time provided for review pursuant to N.J.A.C. 5:34-7.28.
- (e) In reviewing the application, the Director shall utilize the following criteria, as established by N.J.S.A. 40A:11-11: 1. Provision for maintaining adequate records and orderly procedures to facilitate audit and efficient administration;
 2. Adequacy of public disclosure of such actions as are taken by the participants;
 3. Adequacy of procedures to facilitate compliance with all provisions of the Local Public Contracts Law, Public School Contracts Law and corresponding rules; and
 4. Clarity of provisions to assure that the responsibilities of the respective parties are understood.
- (f) Approval shall be for a period not to exceed five years, and shall be limited to the terms, participants and scope of services presented for approval. Any subsequent changes shall be submitted to the Director on Form CP- 2001.
- (g) The lead agency shall notify the Director in writing of a decision to terminate the registration of the system prior to its approved expiration date.

5:34-7.6 Cooperative pricing system or joint purchasing system membership registration

- (a) A contracting unit may apply for membership in an approved cooperative purchasing system by passage of a resolution and executing a formal agreement with the lead agency.
- (b) The lead agency shall apply to the Director for approval on behalf of the proposed new member on Form CP-2001.
- (c) The Director shall act upon the application within the time provided for review pursuant to N.J.A.C. 5:34-7.28.
- (d) Participation in the system for all registered members terminates on the system expiration date assigned by the Director.
- (e) The lead agency shall notify the Director in writing within five days of the withdrawal of any registered member from an approved cooperative purchasing system.
- (f) A registered member which has formally terminated its participation in an approved cooperative purchasing system, may renew its membership by following the procedure defined in this section.
- (g) A registered member of a cooperative purchasing system shall retain membership in a system until the member formally withdraws from participation or the system is dissolved.

5:34-7.9 Cooperative pricing system or joint purchasing system administrative responsibilities

- (a) Upon approval of system registration and annually thereafter either on the anniversary of the registration of the system or in January of each succeeding year, the lead agency shall publish in its official newspaper a notice similar in content to the following:

Notice of Cooperative Purchasing

(Name of lead agency) acts as lead agency in a cooperative purchasing agreement in cooperation with (list number) registered members. Under this system, the (name of lead agency) solicits competitive bids for certain items purchased by registered members. This is a (specify, joint purchasing system or cooperative pricing system) as defined and regulated by N.J.A.C. 5:34-7. Interested citizens or vendors may obtain information regarding the manner of operation of this system by contacting (name, address and phone number of lead agency). System Identifier _____, approved by the New Jersey Division of Local Government Services through (expiration date of the system).

- (b) Prior to the advertisement for bids, a registered member may request a review copy of the bid specifications.
- (c) Before seeking bids, the lead agency shall obtain from the registered members: 1. In the case of a joint purchasing system, the exact quantity of goods to be provided or services to be performed that the lead agency shall purchase for the registered members.

2. In the case of a cooperative pricing system, the estimated quantities that each registered member proposes to contract for during the life of the master contract.
- (d) The lead agency of a joint purchasing system shall disclose in the specifications, the quantities and details of delivery required.

- (e) The lead agency of a cooperative pricing system shall include in the specifications lead agency requirements, stated in definite quantities; and registered member requirements, stated as individual estimated needs. 1. The specification shall list the registered members who have submitted estimates,

their delivery address, their estimated maximum quantities and other relevant information to permit the bidder to understand what is potentially involved.

- (f) The lead agency in a joint purchasing system and the individual registered members in a cooperative pricing system shall be responsible for compliance with the change order requirements of N.J.A.C. 5:34-4.
- (g) Each registered member may, by resolution, provide for and authorize payment in advance for estimated administrative costs to be paid to the lead agency for a joint purchasing or cooperative pricing system. Such administrative costs shall be budgeted by the lead agency as a Special Item of Revenue offset with appropriations.
- (h) No contract shall be made by any registered member for a price which exceeds any other price available to the registered member.

5:34-7.10 Cooperative purchasing system requirement for bids

- (a) Each request for bids shall contain the following:

- 1. Language requiring uniform bid price(s) for both the lead agency and registered members. A provision with respect to the registered members shall be included substantially as follows:

REQUIREMENTS OF REGISTERED MEMBERS

[] Check here if willing to provide the goods or services herein bid upon to registered members of the (System Name and System Identifier) who have submitted estimates, without substitution or deviation from specifications, size, features, quality, price or availability as herein set forth. It is understood that orders will be placed directly by the registered members identified herein by separate contract, subject to the overall terms of the master contract to be awarded by the (name of the lead agency), and that no additional service or delivery charges will be allowed except as permitted by these specifications.

[] Check here if not willing to extend prices to registered members of the (System Name and System Identifier) who have submitted estimates as described above. It is understood that this will not adversely affect consideration of this bid with respect to the needs of (name of the lead agency).

- 2. A statement as to the procedure to be followed in the event that the lowest responsible bidder, in the bid document, declines to extend prices to the registered members who submitted estimates. Examples of such procedures include:
 - i. The contract for the stated needs of the lead agency will be awarded to the lowest responsible bidder, and new bids will be sought and a master contract subsequently awarded with respect to the needs of the registered members who have submitted estimates;
 - ii. The contract for the needs of the lead agency will be awarded to the lowest responsible bidder, and a master contract for the registered members who have submitted estimates will be awarded to the next lowest bidder whose bid agrees to extend prices; or
 - iii. The contract for the needs of the lead agency will be awarded, all other bids shall be rejected and no further bids will be sought by the lead agency on behalf of the registered members who have submitted estimates.

- (b) The master contract shall state that the bid prices may be extended to registered members who have not submitted estimates prior to the advertisement for bids with the written approval of the lead agency and the contractor.

- (c) A statement as to whether or not insurance certificates and/or performance bonds are necessary.

5:34-7.11 Cooperative pricing system financial and contractual details

- (a) The lead agency shall certify the funds available for its own needs.
- (b) The master contract executed shall provide for the following: 1. The quantities ordered for the lead agency's own needs; and
2. The estimated aggregate quantities to be ordered by the registered members who submitted estimates, subject to the specifications and prices set forth in the master contract.
- (c) The lead agency shall supply the registered members of the cooperative pricing system who have submitted estimates, the name of the successful bidder, prices awarded and the contract identification number. A registered member may request a copy of the specifications. Each registered member who submitted estimates may then order directly from the vendor. If the cost of the order is under the bid threshold, and if the contracting agent is authorized to do so, then the contracting agent may issue a purchase order, pursuant to N.J.S.A. 40A:11-3a or 18A:18A-3a, as appropriate. If the cost of the order exceeds the bid threshold, then the contract must be awarded by resolution of the governing body in accordance with N.J.S.A. 40A:11-4a or 18A:18A-4a, as appropriate. The system identifier shall be affixed to each purchase order or contract and shown on all forms pertaining thereto.
- (d) Registered members who submit estimates shall not issue orders and contractors shall not make deliveries, that deviate from the specifications or price as set forth in the master contract.

§ 5:34-7.14 Joint purchasing systems financial and contractual details, exclusive of boards of education

(a) The financial and contractual details set forth in this section shall apply only to contracting units subject to the requirements of the Local Public Contracts Law (N.J.S.A. 40A:11-1 et seq.). Boards of education shall be subject to the financial and contractual details set forth in the Public School Contracts Law (N.J.S.A. 18A:18A-1.1 et seq.) and the administrative requirements contained in N.J.A.C. 6A:23A. (b) In the case of a joint purchasing system, the lead agency shall comply with the certification of funds requirement of N.J.A.C. 5:30-5 with respect to the full amount of the contract and Division of Local Government Services' requirements for Encumbrance Accounting Systems. (c) The funds of the lead agency applicable to its own share of the contract to be awarded shall be charged to regular appropriations in its budget.

(d) Prior to handling the funds of the other registered members, the lead agency shall request approval of the Director for a Dedication by Rider pursuant to N.J.S.A. 40A:4-39, entitled "Receipts from Other Agencies participating in the (Name of System) joint purchasing system, System Identifier _____." In order to meet the statutory requirement that expenditures under a Rider may be made only in accordance with the availability of funds, the following steps shall be taken:

1. Prior to the award of contract, the chief financial officer of each registered member (other than the lead agency) shall issue a certificate of available funds, in accordance with N.J.A.C. 5:30-5.
2. The contracting agent of each registered member, with authorization by resolution of the governing body if over the statutory bid limit, shall issue a purchase order to the lead agency together with a copy of its certification of available funds.
3. The lead agency shall, in accordance with N.J.A.C. 5:30-5, issue its own certificate, covering the full amount of the proposed contract including both its own share and those of the registered members. The certificate shall be conditional with respect to the amounts due from the registered members so that the certificate shall read in part as in the following example:

\$ 5,000 From (Lead Agency) appropriation number 207, Road Department, Other Expenses. \$ 2,000 Due from (Name of registered member) pursuant to its purchase order number 70243 and Certification of Available Funds dated _____, (Lead Agency) Dedication by Rider Account Number 7. \$ 1,000 Due from (Name of registered member) per its purchase order Number A-402 and Certification of Available Funds dated _____, (Lead Agency) Dedication by Rider Account Number 7. \$ 8,000 Total Certified.

4. The lead agency shall then award the total contract to the successful bidder.

5. The lead agency shall not advance funds of its own to cover the purchase on behalf of the registered members but shall make payments only upon receipt of the funds. Payments to the lead agency shall be made promptly in accordance with an agreed-upon schedule, which may include making payment to the lead agency in advance of receipt of goods. The voucher providing for the advance payment shall indicate: "Transfer of funds to (name of lead agency) as cash advance to enable it to purchase the following on behalf of (name of registered member) as Lead Agency in (name of joint purchasing system), System Identifier _____. " "(Then list what is to be purchased.)"

6. Funds received by the lead agency as advances from registered members shall be:

- i. Placed in a separate bank account established within the Rider and held in trust for the purpose of permitting the lead agency to serve as contracting agent for the awarding of joint purchasing contracts;
- i ii. Used only for the payment of actual bills to the contractors pursuant to the overall joint purchasing agreement; and
- iii. Returned immediately to the registered member upon any determination that the full amount is not needed for payments as initially expected.

5:34-7.28 Time for review-all systems

- (a) The Director shall approve or reject all applications within 45 days.
- (b) The 45 day review period shall commence only upon the determination by the Director that the application is complete.
- (c) Failure of the Director to act upon an application within 45 days shall constitute a default approval of the application for a period of five years or in the case of new membership, until the date previously approved by the Director for the termination of system registration pursuant to N.J.A.C. 5:34-7.5(f).

HEALTH INSURANCE COOPERATIVE PRICING SYSTEM AGREEMENT

FOR A COOPERATIVE PRICING SYSTEM

This Agreement made and entered into this ____ day _____, 2024, by and between the SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND ("SNJ Fund"), and the BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND ("BMED"), who desire to form a cooperative pricing system as authorized under applicable New Jersey law and regulations.

W I T N E S S E T H

WHEREAS, the Local Public Contracts Law, the Public School Contracts Law and applicable regulations (N.J. S. A. 40A:11-11(5), N.J.S.A. 18A:18A-11, and N.J.A.C. 5:34-7.3) authorize two or more contracting units to establish a Cooperative Pricing System for the provision and performance of goods and services and enter into a Cooperative Pricing System Agreement for its administration; and

WHEREAS, the SNJ FUND and BMED are forming a voluntary Cooperative Pricing System with other contracting units; and

WHEREAS, the purpose of this Cooperative Pricing System is to effect substantial economies in the provision and performance of third party claim administration services for medical, dental and vision health benefits, prescription drug pharmacy benefit manager services and Medicare Advantage Plan providers and such ancillary contracts for related goods and services; and

WHEREAS, the SNJ Fund and the BMED have approved the within Agreement by Resolution in accordance with the aforesaid statute and regulation; and

WHEREAS, it is the desire of all parties to enter into such Agreement for said purposes;

NOW, THEREFORE, IN CONSIDERATION OF the promises and of the covenants, terms and conditions hereinafter set forth, it is mutually agreed as follows:

1. **Authorization and Name:**

Pursuant to the authority granted to contracting units as set forth in N.J.S.A. 40A:11-11(5) and the applicable regulations found at N.J.A.C. 5:34-7.3 (hereinafter the "Cooperative Pricing System Requirements"), the SNJ FUND and BMED have agreed and do hereby form a cooperative pricing system for the purpose of providing third party claim administration services for medical, dental and vision health benefits, prescription drug pharmacy benefit manager services and Medicare Advantage Plan providers and such ancillary contracts for related goods and services to member contracting units of the cooperative pricing system.

(a) The cooperative pricing system shall be known as the HEALTH INSURANCE COOPERATIVE PRICING SYSTEM ("HICPS").

- (b) The SNJ FUND is hereby designated as the "Lead Agency" as defined in N.J.A.C. 5:34-7.2.
- (c) One or more other contracting units may become members of and participants in the HICPS by passing the appropriate resolution and signing a Joinder Agreement accepting the terms and conditions of this Agreement and stating the term of their membership.

2. Goods and Services to be purchased:

The goods or services to be priced cooperatively by the HICPS may include all goods and services which may be bid under the laws and regulations of the State of New Jersey and such other items as two or more participating contracting units agree can be purchased on a cooperative basis inclusive of, but not limited to, third party claim administration services for medical, dental and vision health benefits, prescription drug pharmacy benefit manager services and Medicare Advantage Plan providers and such ancillary contracts for related goods and services.

3. Advertising for Bids & Contract Award:

(a) The Lead Agency, when advertising for bids or soliciting informal quotations shall receive bids or quotations on behalf of all participating contracting units. Following the receipt of bids, the Lead Agency shall review said bids and on behalf of all participating contracting units, either reject all or certain of the bids or make an award to the lowest responsible bidder or to the successful bidders for each separate item. This award shall result in the Lead Agency entering into a Master Contract with the successful bidder(s) providing for two categories of purchases:

- (i) The quantities ordered for the Lead Agency's own needs, and
- (ii) The estimated aggregate quantities to be ordered by other participating contracting units by separate contracts, subject to the specifications and prices set forth in the Lead Agency's Master Contract

(b) When advertising for bids and making an award of one or more contracts the Lead Agency shall comply with the provisions and requirements of the Local Public Contracts Law ("LPCL") and the Public School Contracts Law ("PSCL") as applicable to the HICPS and its member contracting units. The Lead Agency shall include in the specifications the Lead Agency requirements, stated in definite quantities; and registered member requirements, stated as individual estimated needs. The specification shall list the registered members who have submitted estimates, their delivery address, their estimated maximum quantities, and other relevant information to permit the bidder to understand what is potentially involved.

(c) The Lead Agency shall supply the registered members of the cooperative pricing system who have submitted estimates, the name of the successful bidder, prices awarded and the contract identification number. A registered member may request a copy of the specifications. Each registered member who submitted estimates may then order directly from the vendor. If the cost of the order is under the bid threshold, and if the contracting agent is authorized to do so, then the contracting agent may issue a purchase order, pursuant to N.J.S.A. 40A:11-3a or N.J.S.A. 18A:18A-3a, as appropriate. If the cost of the order exceeds the bid threshold, then the contract must be awarded by resolution of the governing body in accordance with N.J.S.A. 40A:11-4a or N.J.S.A. 18A:18A-4a, as appropriate. The system identifier shall be affixed to each purchase order or contract and shown on all forms pertaining thereto.

(d) Registered members who submit estimates shall not issue orders and contractors shall not make deliveries that deviate from the specifications or price as set forth in the master contract.

4. Management and Responsibilities:

(a) All business and financial affairs shall be under the supervision and control of the Lead Agency. The Lead Agency shall provide all necessary supervision for the HICPS in compliance with all applicable laws, rules, regulations and policies governing the administration of a cooperative pricing system and the HICPS. The Lead Agency will act as the representative of the HICPS in all matters relating to such administration. The Lead Agency shall also advise the HICPS on cooperative pricing system matters, coordinate the activities of other contracting units that are members of the HICPS and provide the necessary administrative and reporting requirements so that the HICPS shall be in compliance with the Cooperative Pricing System Requirements. The Lead Agency shall maintain records of all financial transactions in accordance with applicable laws and regulations under the LPCL and PSCL. The Lead Agency shall provide documentation to the member contracting units which reflect the programs, procedures and vendors utilized by the HICPS to implement and maintain the cooperative pricing system.

(b) The registered members of the HICPS shall be responsible for supplying the Lead Agency with the estimated quantities that each registered member proposes to contract for during the life of the master contract. A registered member may request a copy of the specifications.

(c) The Lead Agency when reviewing responses for advertised goods and services to be purchased by the HICPS shall be based solely on the Qualified Purchasing Agent's evaluation of the responsive information submitted and the specifications set forth in the applicable solicitation. The Lead Agency reserves the right to negotiate the terms and conditions of a contract with the successful firm or firms to obtain the most advantageous situation for the HICPS.

(d) The Lead Agency shall be responsible for registering the cooperative pricing system with the Division of Local Government Services ("DLGS") and shall ensure that the system identifier assigned by DLGS appears on all documentation related to purchases by the HICPS, including bidding documents, purchase orders, vouchers, contracts and records.

5. Costs and Purchase Prices:

Any administrative costs incurred by the Lead Agency shall be paid pro rata among the registered members, including the Lead Agency, in accordance with the quantities of the goods and services purchased by the individual registered member contracting unit as compared to the total quantities purchased by all registered member contracting units of the HICPS, inclusive of the Lead Agency. The items and classes of items which may be designated by the participating contracting units hereto may be purchased cooperatively for the period commencing with the execution of this Agreement and continuing until terminated as hereinafter provided.

6. Legal Notice:

The Lead Agency, on behalf of all participating contracting units, shall upon approval of the registration of the System and annually thereafter on the anniversary of the registration of the system publish a legal ad in such format as required by N.J.A.C. 5:34-7.9(a) in its official newspaper normally used for such purposes.

7. Financial Obligations:

No participating contracting unit in the Cooperative Pricing System shall be responsible for payment for any items ordered or for performance generally, by any other participating contracting unit. Each participating contracting unit shall accordingly be liable only for its own performance and for items ordered and received by it and no one assumes any additional responsibility or liability.

8. Required Notices to Bidders:

The provisions of Paragraphs 3, and 7 above shall be quoted or referred to and sufficiently described in all specifications so that each bidder shall be on notice as to the respective responsibilities and liabilities of the participating contracting units.

9. No Other Purchase Orders:

No participating contracting unit in the Cooperative Pricing System shall issue a purchase order or contract for a price which exceeds any other price available to it from any other such system in which it is authorized to participate or from bids or quotations which it has itself received.

10. Lead Agency Discretion:

The Lead Agency reserves the right to exclude from consideration any good or service if, in its opinion, the pooling of purchasing requirements or needs of the participating contracting units is either not beneficial or not workable.

11. Adequate Funding:

The Lead Agency shall appropriate sufficient funds to enable it to perform the administrative responsibilities assumed pursuant to this Agreement.

12. Effective Date:

This Agreement shall become effective on the date adopted on the resolution subject to the review and approval of the Director of the Division of Local Government Services and shall continue in effect for a period not to exceed five (5) years from said date unless any party to this Agreement shall give written notice of its intention to terminate its participation.

13. Term:

The HICPS shall, on behalf of all participating contracting units in the cooperative pricing system, renew the system every 5 years in perpetuity; unless all parties give written notice that there is no longer a desire or a need for participation in the system.

14. System Identifier:

All records and documents maintained or utilized pursuant to terms of this Agreement shall be identified by the System Identifier assigned by the Director, Division of Local Government Services, and such other numbers as are assigned by the Lead Agency for purposes of identifying each contract and item awarded.

15. Binding Effect:

This Agreement shall be binding upon and inure to the benefit of the successors and assigns of the respective parties hereto.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be signed and executed by their authorized corporate officers and their respective seals to be hereto affixed the day and year above written.

Southern New Jersey Regional
Employee Benefits Fund

Bergen Municipal Employee Benefits Fund

By: _____
Name:
Title:

By: _____
Name:
Title:

Attest: _____
Name:
Title:

Attest: _____
Name:
Title:

HEALTH INSURANCE COOPERATIVE PRICING SYSTEM

JOINDER AGREEMENT

THIS JOINDER AGREEMENT (this "Joinder"), is being executed by _____, (the "Fund") a joint health insurance fund formed pursuant to N.J. S.A. 40A:10-36 (18A:18B-1 et seq.) , having offices at 9 Campus Drive, Suite 216, Parsippany, NJ 07054, in order to become a member of the HEALTH INSURANCE COOPERATIVE PRICING SYSTEM formed on _____, 2024 (the "HICPS") in order to obtain third party claim administration services for medical, dental and vision health benefits, prescription drug pharmacy benefit manager services and Medicare Advantage Plan providers.

WHEREAS, Paragraph 1(c) of the HICPS Agreement requires any contracting unit desiring to become a member of the HICPS to adopt a resolution in accordance with applicable laws substantially in the same form attached to this Agreement as Exhibit A (the "Resolution") approving its membership in the HICPS and the execution of this Joinder; and

WHEREAS, the Fund has adopted the Resolution and transmitted a certified copy to the Lead Agency (as defined in the HICPS Agreement), for delivery to the State of New Jersey pursuant to applicable law; and

WHEREAS, the Fund has reviewed the terms of the HICPA Agreement and desires to be bound thereby;

NOW THEREFORE, for and in consideration of the promises herein contained and intending to be legally bound, the Fund, covenants and agrees as follows:

1. The Fund hereby acknowledges, consents to, joins in and agrees to be bound by the HICPS Agreement and all of the terms and conditions thereof all of which are incorporated herein by this reference, as if the Fund had been an original signatory thereto. A copy of the HICPS Agreement has been provided to the Fund, the receipt of which is hereby acknowledged.

IN WITNESS WHEREOF, the Fund has properly executed this Joinder as of the date noted below.

ATTEST: **[FUND]**

By: _____ By: _____

Name:

Title:

Date: _____

ACCEPTED AND AGREED:

Health Insurance Cooperative Pricing System

By: _____
Chairman of Executive Committee of the Lead Agency

Date: _____

APPENDIX IV



RETAINED DIVIDEND RELEASE FORM

The Schools Health Insurance Fund allows for members to retain released dividends on Fund books to be requested at a future date. These funds are held in an interest bearing account.

The _____ Board of Education requests the release of
\$_____ of its retained dividend balance.

Please select

- ☐ Check in the amount of _____
- ☐ Reduce one month bill by \$_____ Please select month/year
_____/_____

Name

Signature

Date:

Address to send check to:

APPENDIX V



AVAILABLE ONLINE AT NO COST TO MEMBERS

SAVE THE DATES

14th Annual MEL, MRHIF & NJCE Educational Seminar

FRIDAY, APRIL 19 ▶ 9:00 AM – NOON

FRIDAY, APRIL 26 ▶ 9:00 AM – NOON

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

The seminar is expected to be eligible for the following continuing education credits:

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

TO REGISTER

Visit njmel.org or email Jaine Testa at jainet@permainc.com

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**NEW JERSEY COUNTIES
EXCESS JOINT INSURANCE FUND**

AGENDA

FRIDAY, APRIL 19

- Keynote Address
- Ethics
- Benefits Issues

FRIDAY, APRIL 26

- JIF Governance
- Status of Insurance Markets
- Legislative Issues
- Coverage Overview
- Claims Concerns
- Risk Control Update
- Cyber Update

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