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AGENDA & REPORTS

MARCH 26, 2025

12:00 PM

Moorestown Community House

SCHOOLS HEALTH INSURANCE FUND
MEETING: March 26, 2025
Moorestown Community House
12:00 PM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ BY THE CHAIR

Call to Order

As Chair 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 2024-2025 BOARD OF TRUSTEES

Officers

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

Board of Trustees

Christopher Lessard, Frankford Twp BOE
Evon DiGangi, Medford Twp BOE
Nicholas Bice, Burlington Twp BOE
Jason Schimpf, Kingsway Regional School District
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
Scott Kipers, Black Horse Pike BOE
Stephen Jakubowski, West Deptford BOE
Janice Grassia, Gateway Regional BOE
Donna DiLapo, Mt. Holly BOE

OPEN MINUTES: February 26, 2025 (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 -
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TREASURER - (Verrill & Verrill)
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ATTORNEY - (J. Kenneth Harris.)
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NETWORK & THIRD-PARTY ADMINISTRATOR - (Aetna - Jason Silverstein)
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NETWORK & THIRD-PARTY ADMINISTRATOR - (AmeriHealth - Kristina Strain)
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NETWORK & THIRD-PARTY ADMINISTRATOR - (Horizon - Michelle Witherspoon)
 Monthly Report

PRESCRIPTION ADMINISTRATOR - (Express Scripts - Charles Yuk)
 Monthly ReportPage 36

DENTAL ADMINISTRATOR - (Delta Dental - Christa O'Donnell)
 Monthly ReportPage 40

CONSENT AGENDAPage 42
 Resolution 7-25: 2025-2026 Budget Adoption Page 43
 Resolution 8-25: New Member Approval Page 44
 Resolution 9-25: Approval to Hire EUS: Medical TPA and PBM Page 45
 Resolution 10-25: March 2025 Bills List Page 46

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
MARCH 26, 2025**

PRO FORMA REPORTS

- **Fast Track Financial Report** – as of January 31, 2025 (page 7)

2025-2026 BUDGET ADOPTION

Enclosed is the 2025-2026 SHIF Budget. There have been no changes to what was introduced. Draft rates have been released to all brokers and unless there were no discrepancies rates are now considered final. We are in receipt of a few rate correction/plan removal requests and those are being processed. Budget and Assessments are included in the Appendix II.

Motion: *Motion to open the Public Hearing on the 2025/2026 Budget*

Discussion of Budget and Assessments

Motion: *Motion to close the Public Hearing*

Motion: *Motion to adopt resolution 7-25 and approve the 2025-2026 Schools Health Insurance Fund Budget in the amount of \$775,877,418.*

2024 NEW MEMBER PHARMACY REBATES

In reviewing Year End financials, PERMA discovered an error with the Express Scripts rebate implementation on the new 2024 groups, therefore the Fund did not receive the guaranteed rebates for those groups. We expect to have a memo from Express Scripts to address the issue in full at the meeting.

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

2024 - 2025 PROFESSIONAL/CONSULTANT RFPS - Status

1. **Program Manager (7/1/2024-6/30/2027):** Still waiting pre advertisement approval from OSC. Conner Strong & Buckelew is continuing to provide these services as an extension of the prior contract.
2. **Nurse Advocacy (7/1/2024-6/30/2025):** The RFP has been released and is due April 8th 2025.

NEW MEMBERS

Morris County Vo-Tech has submitted a request to join the SHIF. The underwriting details are below and have been reviewed and approved by the Fund Actuary, Underwriter and Operations Committee.

New Member Overview	
Fund	Schools Health Insurance Fund
Entity	Morris County Vo Tech
County	Morris
Effective Date	6/1/2025 - 6/30/2026
Lines of Coverage	Medical & Rx
Eligible Employees	104
Retiree Coverage	No
Current Arrangement	State Health Benefits Fund
Actuary Certification	Yes: Standard Underwriting Methodolgy
Run Out Claims	SHBP
Broker	Employee Benefits Consulting Services Group
Member approval?	No
Per employee Perm Month	\$2,310
Special Requests	None

Resolution 8-25 is included in the consent agenda.

MEDICAL TPA AND PBM RFPs

In the interest of time, the Fund will begin the process of developing the Medical TPA and Pharmacy Benefit Manager RFPs. The Cooperative Pricing System may still be an option, but due to the size of the contract, it may be more efficient to release these RFPs locally rather than with all cooperative members. Should the Co-op route work better, we will bring this back at the next meeting.

In the meantime, **Resolution 9-25** allows PERMA and the QPA to start the procurement process.

SUBCOMMITTEES

At the last meeting we announced there were a few vacancies in the subcommittees. The list was distributed after the meeting with no requested changes. The executive committee should ratify by simple motion.

Finance and Contracts	Operations & Nominations	Wellness & Claims
Nicholas Bice, Chair	Bethann Coleman, Chair	Christopher Lessard, Chair
Jason Schimpf	Evon DiGangi	Patrick Doyle
Tim Stys	Sharon Krizko	Janice Grassia
John Bilodeau	Michael Blake	Donna DiLapo
Stephen Jakubowski	Fran Adler	Scott Kipers
Helen Haley		

MOTION: Motion to approve the new subcommittee member assignments

FINANCIAL DISCLOSURE STATEMENTS

The Financial Disclosure notice emails will be sent out in April. The deadline for filing is April 30, 2025. Please file as soon as you get the email.

Reminder: A separate filing will need to be done for each position – HIF Fund Commissioner, JIF Fund Commissioner, Local Elected Official, etc.

2025 MEL, MR HIF & NJCE JIF Educational Seminar:

The 15th annual seminar will be conducted virtually on 2 half-day sessions: Friday April 25th and Friday May 2nd 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).

Enclosed in **Appendix III** is the latest in a series of Power of Collaboration advertisement to be published in the League of Municipalities magazine which highlights the educational seminar.

VOUCHERS

Starting with the April vouchers, PERMA will be sending both vouchers and backup exclusively through DocuSign to Fund vendors. Please reach out to HIFfinance@permainc.com to confirm the current email address that vouchers are sent to can continue to be used to send via DocuSign.

**FINANCIAL FAST TRACK REPORT
AS OF January 31, 2025**

	<i>THIS MONTH</i>	<i>YTD CHANGE</i>	<i>PRIOR YEAR END</i>	<i>FUND BALANCE</i>
1. UNDERWRITING INCOME	58,827,699	394,989,163	2,716,815,450	3,111,804,613
2. CLAIM EXPENSES				
Paid Claims	57,373,726	369,387,965	2,339,432,829	2,708,820,794
IBNR	1,521,049	12,857,864	53,005,500	65,863,364
Less Specific Excess	-	(4,798,833)	(31,907,201)	(36,706,034)
Less Aggregate Excess	-	-	-	-
TOTAL CLAIMS	58,894,775	377,446,996	2,360,531,128	2,737,978,124
3. EXPENSES				
MA & HMO Premiums	10,630	75,412	790,795	866,207
Excess Premiums	1,179,765	7,914,294	67,148,996	75,063,290
Administrative	3,451,318	25,016,847	192,383,811	217,400,657
TOTAL EXPENSES	4,641,713	33,006,553	260,323,602	293,330,155
4. UNDERWRITING PROFIT/(LOSS) (1-2-3)	(4,708,789)	(15,464,386)	95,960,720	80,496,334
5. INVESTMENT INCOME	558,197	4,407,246	20,818,733	25,225,979
6. DIVIDEND INCOME	0	0	9,460,196	9,460,196
7. STATUTORY PROFIT/(LOSS) (4+5+6)	(4,150,592)	(11,057,140)	126,239,650	115,182,509
8. DIVIDEND	0	0	52,524,468	52,524,468
9. TRANSFERRED SURPLUS			28,079,045	28,079,045
10 STATUTORY SURPLUS (7-8)	(4,150,592)	(11,057,140)	101,794,227	90,737,087

SURPLUS (DEFICITS) BY FUND YEAR

Closed	Surplus	272,738	(908,828)	123,789,796	122,880,967
	Cash	857,571	(5,533,029)	150,119,762	144,586,732
2023/2024	Surplus	(701,101)	4,041,765	(21,995,569)	(17,953,804)
	Cash	(334,299)	(33,383,486)	19,925,026	(13,458,461)
2024/2025	Surplus	(3,722,229)	(14,190,077)		(14,190,077)
	Cash	(10,286,263)	34,672,646		34,672,646
TOTAL SURPLUS (DEFICITS)		(4,150,592)	(11,057,140)	101,794,227	90,737,087
TOTAL CASH		(9,762,991)	(4,243,870)	170,044,787	165,800,917

CLAIM ANALYSIS BY FUND YEAR

TOTAL CLOSED YEAR CLAIMS	86,404	4,085,822	1,840,487,050	1,844,572,871
FUND YEAR 2023/2024				
Paid Claims	1,473,978	51,712,582	471,190,054	522,902,636
IBNR	(742,077)	(50,699,761)	53,005,500	2,305,739
Less Specific Excess	0	(4,719,003)	(4,151,476)	(8,870,479)
Less Aggregate Excess	0	0	0	0
TOTAL	731,901	(3,706,182)	520,044,078	516,337,896
FUND YEAR 2024/2025				
Paid Claims	55,813,344	313,729,536		313,729,536
IBNR	2,263,126	63,557,625		63,557,625
Less Specific Excess	0	(219,805)		(219,805)
Less Aggregate Excess	0	0		0
TOTAL	58,076,470	377,067,356	0	377,067,356
COMBINED TOTAL CLAIMS	58,894,775	377,446,996	2,360,531,128	2,737,978,124

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 JANUARY 31, 2025

BY FUND YEAR

	SHIF 2024/2025	SHIF 2023/2024	CLOSED YEAR	FUND BALANCE
ASSETS				
Cash & Cash Equivalents	34,672,646	(13,458,461)	144,586,732	165,800,917
Assesments Receivable (Prepaid)	16,325,623	297,282	(36,056)	16,586,849
Interest Receivable	-	-	4	4
Specific Excess Receivable	219,805	2,795,465	24,175	3,039,445
Aggregate Excess Receivable	-	-	-	-
Dividend Receivable	-	-	-	-
Deferred Assessment Receivable	-	-	407,249	407,249
Prepaid Admin Fees	3,662	-	-	3,662
Other Assets	7,462,767	-	836,594	8,299,361
Total Assets	58,684,502	(10,365,714)	145,818,698	194,137,487
LIABILITIES				
Accounts Payable	-	-	-	-
IBNR Reserve	63,557,625	2,305,739	-	65,863,364
A4 Retiree Surcharge	8,819,373	5,164,764	-	13,984,137
Dividends Payable	-	-	-	-
Retained Dividends	-	-	22,937,730	22,937,730
Accrued/Other Liabilities	497,581	117,587	-	615,168
Total Liabilities	72,874,579	7,588,090	22,937,730	103,400,399
EQUITY				
Surplus / (Deficit)	(14,190,077)	(17,953,804)	122,880,968	90,737,087
Total Equity	(14,190,077)	(17,953,804)	122,880,968	90,737,087
Total Liabilities & Equity	58,684,502	(10,365,714)	145,818,698	194,137,487
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 2023-24	2024-2025							
INDICES	YEAR END	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB
Cash Position	\$ 170,044,787	\$ 158,914,409	\$ 168,397,010	\$ 172,250,344	\$ 164,004,128	\$ 179,658,889	\$ 175,563,908	\$ 165,800,917	
IBNR	\$ 53,005,500	\$ 52,197,713	\$ 57,487,271	\$ 61,288,785	\$ 63,572,636	\$ 64,080,902	\$ 64,342,315	\$ 65,863,364	
Assets	\$ 196,102,049	\$ 189,797,076	\$ 191,166,184	\$ 193,337,953	\$ 190,140,594	\$ 191,076,996	\$ 193,405,144	\$ 194,137,487	
Liabilities	\$ 90,420,781	\$ 81,527,407	\$ 89,575,972	\$ 92,423,321	\$ 95,587,036	\$ 97,172,834	\$ 98,517,465	\$ 103,400,399	
Surplus	\$ 105,681,268	\$ 108,269,669	\$ 101,590,212	\$ 100,914,632	\$ 94,553,558	\$ 93,904,162	\$ 94,887,679	\$ 90,737,087	
Claims Paid -- Month	\$ 44,027,914	\$ 46,503,154	\$ 55,866,008	\$ 48,425,031	\$ 57,483,094	\$ 52,864,661	\$ 50,872,293	\$ 57,373,726	
Claims Budget -- Month	\$ 41,600,432	\$ 50,805,528	\$ 50,667,521	\$ 51,354,045	\$ 51,335,571	\$ 51,367,031	\$ 51,385,642	\$ 53,640,425	
Claims Paid -- YTD	\$ 517,685,051	\$ 46,503,154	\$ 102,369,161	\$ 150,794,192	\$ 208,277,286	\$ 261,141,947	\$ 312,014,239	\$ 369,387,965	
Claims Budget -- YTD	\$ 495,439,342	\$ 50,805,528	\$ 101,473,049	\$ 152,827,094	\$ 204,162,665	\$ 255,529,696	\$ 306,915,338	\$ 360,555,763	
RATIOS									
Cash Position to Claims Paid	3.86	3.42	3.01	3.56	2.85	3.4	3.45	2.89	
Claims Paid to Claims Budget -- Month	1.06	0.92	1.1	0.94	1.12	1.03	0.99	1.07	
Claims Paid to Claims Budget -- YTD	1.04	0.92	1.01	0.99	1.02	1.02	1.02	1.02	
Cash Position to IBNR	3.21	3.04	2.93	2.81	2.58	2.8	2.73	2.52	
Assets to Liabilities	2.17	2.33	2.13	2.09	1.99	1.97	1.96	1.88	
Surplus as Months of Claims	2.54	2.13	2.01	1.97	1.84	1.83	1.85	1.69	
IBNR to Claims Budget -- Month	1.27	1.03	1.13	1.19	1.24	1.25	1.25	1.23	

Schools Health Insurance Fund
2024/2025 Budget Status Report
as of January 31, 2025

	Actual	Annualized	Certified	Actual	\$ Variance	% Variance
Expected Losses	Budget	Budget	as of 7/1/24	Expensed		
Medical Claims Subtotal	323,458,631	564,545,954	484,186,246	332,264,537	(8,805,906)	-3%
Prescription Claims Subtotal	34,040,428	59,357,619	45,513,067	41,912,725	(7,872,297)	-23%
Dental Claims	3,056,704	5,252,712	5,147,576	2,890,094	166,610	5%
Subtotal Claims	360,555,763	629,156,285	534,846,889	377,067,356	(16,511,593)	-5%
Rate Stabilization Reserve	653,734	1,120,686	1,120,686	0	653,734	0%
DMO Premiums	57,977	100,860	94,902	75,412	(17,435)	-30%
Reinsurance						
Specific	7,912,938	13,845,122	11,942,563	7,914,294	(1,356)	0%
Total Loss Fund	369,180,412	644,222,953	548,005,040	385,057,063	(15,876,651)	-4%
Expenses						
Legal	23,049	39,513	39,513	31,340	(8,291)	-36%
Treasurer	16,039	27,496	27,496	16,039	(0)	0%
Administrator	1,658,924	2,901,089	2,512,372	1,659,274	(350)	0%
Program Manager	4,427,617	7,740,628	6,628,608	4,490,916	(63,299)	-1%
Local Entity Risk Management	4,938,287	8,709,131	7,438,798	4,938,287	-	0%
TPA - Med Aetna	4,793,974	8,420,101	7,596,020	4,807,073	(8,082)	0%
Program Manager - Guardian Nurses	1,032,884	1,807,217	1,558,874	803,154	229,729	22%
TPA - Med AmeriHealth Admin	1,275,818	2,187,738	1,701,921	1,277,677	(1,859)	0%
TPA - Med Horizon	7,675	13,284	16,295	8,089	(413)	-5%
TPA - Vision	5,018	8,159	7,942	Included above in Med Aetna		
TPA - Dental	154,769	267,006	261,923	155,684	(915)	-1%
Actuary	21,648	37,110	37,110	21,648	(1)	0%
Auditor	12,259	21,016	21,016	12,259	0	0%
Subtotal Expenses	18,367,961	32,179,487	27,847,888	18,221,439	146,521	1%
Misc/Contingenct Expenses	33,185	56,889	56,889	7,684	25,502	77%
Data Analysis System	0	0	0	0	-	#DIV/0!
Wellness Program	512,734	897,121	773,841	187,585	325,149	63%
Affordable Care Act Taxes	110,209	192,832	166,282	110,209	0	0%
A4 Retiree Surcharge	6,469,173	11,290,921	9,683,725	6,469,173	-	0%
Plan Documents	17,500	30,000	30,000	17,500	-	0%
Total Expenses	25,510,762	44,647,251	38,558,625	25,013,590	497,172	2%
Total Budget	394,691,173	688,870,203	586,563,665	410,070,653	(15,379,479)	-4%

REGULATORY
SCHOOLS HEALTH INSURANCE FUND
YEAR: 2024/2025

<u>Monthly Items</u>	<u>Filing Status</u>
Budget	Filed
Assessments	Filed
Actuarial Certification	Filed
Reinsurance Policies	Filed
Fund Commissioners	Filed
Fund Officers	Filed
Renewal Resolutions	Filed
Indemnity and Trust	Filed
New Members	Filed
Withdrawals	N/A
Risk Management Plan and By Laws	Filed
Cash Management Plan	Filed
Unaudited Financials	Filed
Annual Audit	June 30, 2024 - filed
Budget Changes	N/A
Transfers	N/A
Additional Assessments	N/A
Professional Changes	N/A
Officer Changes	N/A
RMP Changes	N/A
Bylaw Amendments	N/A
Contracts	Filed
Benefit Changes	N/A

School's Health Insurance Fund
Program Manager's Report
March 2025
Program Manager: Conner Strong & Buckelew

Eligibility/Enrollment:

Effective March 3rd, please direct all eligibility, enrollment, or system related questions to your assigned Client Service Team members. Inquiries should no longer be sent to the SHIF Enrollment mailbox.

System training (new and refresher) is provided to all contacts with WEX access **every 3rd Wednesday at 10AM**. Please contact HIFtraining@permainc.com for additional information or to request an invite.

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

We recommend all groups have a back-up WEX user to avoid processing delays.

Operational Updates:

Open Enrollment Dates: April 21st through May 9th (Passive)

All enrollments and/or changes must be entered in WEX by May 23rd to allow members to receive ID cards timely. As a reminder, only medical ID cards are issued via U.S. Mail. Prescription and ID cards are available through the carrier portal. **Please see Appendix for OE materials**

Coverage Updates:

Aetna:

CVS Health Virtual Care - Effective 7/1//25 - Aetna covered members

Beginning July 1, 2025, CVS Health Virtual Care will replace Teladoc for all Aetna covered members. Members will receive:

- On-Demand Care - Access to 24/7 quick care for minor illnesses and injuries
- Mental Health Services - counseling for conditions such as anxiety and stress, plus psychiatry services for medication management
- Referred to in-person care when needed at nearby MinuteClinic locations or in-network provider clinic.

Please reference the CVS Health Virtual Care flyer included in the Appendix for additional information including instructions to activate the benefit and create an account.

****Members will receive new ID cards with CVS Health Virtual Care information, replacing Teladoc before 7/1/25. Member ID numbers will not change.**

AmeriHealth:

Nationwide access to Cigna Healthcare PPO Network - AHA PPO covered members

Effective 7/1/25 all AHA PPO plan members will have nationwide access to the Cigna Healthcare PPO Network. The Cigna Healthcare PPO Network includes more than 1.5 million health care providers and 6,400 hospitals nationwide. AHA plan members can find providers using the instructions in the communication included in the Appendix.

****Due to the change to the Cigna Healthcare PPO Network, AHA enrolled members will receive new ID cards with the Cigna Healthcare logo before 7/1/25. Member ID numbers will not change.**

Express Scripts:

2025 Formulary and SaveOn Listings

National Preferred Formulary (NPF) and Exclusions list effective 7/1/25 were sent to the brokers the week of March 24th. There are 73 SHIF members impacted by the change in formulary. Impacted members receive notification prior to 7/1/25. The notification will include covered suggested alternative(s) medications. **See appendix for updated formulary listings.**

There are no SaveOn formulary changes effective 7/1/25, the current listing as of 1/1/25 will remain as the current listing through 12/31/25, unless otherwise notified.

NPF Listing:

- NPF Exclusions Listing, please note the following:
 - Humalog - excluded for members with a new prescription as of **1/1/25**, members currently taking the drug will be excluded effective **1/1/26**
 - Impacted members should share the covered preferred alternatives provided in the listing with their providers
 - Humira - excluded for members with a new prescription as of **1/1/25**, members currently taking the drug will be excluded effective **7/1/25**
 - Impacted members (**33**) should share the covered preferred alternatives provided in the listing with their providers
 - Impacted members will be notified by ESI. The notification will include covered preferred alternatives under the NPF

Encircle Program (GLP-1 Weight Loss)

Effective September 1, 2024:

- Members with new prescriptions, including renewal prescriptions for expired prior authorizations (PA), will need to meet the following criteria to be approved for a GLP-1 weight loss medication:
 - BMI \geq 32 OR

- BMI between $27 \leq 32$ WITH 2 or more documented comorbidities
- Members with an active approved PA prior to 9/1/2024 will not be required to adhere to the above guidelines until their PA expires.
 - Upon renewal of their PA, members will need to meet the above BMI requirements to be considered for approval

Effective January 1, 2025:

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

- Members will receive a welcome kit from Omada free of charge. The kit includes a digital scale and information on downloading the mobile app and/or using the web browser. The scale is programmed to the member's ESI active account prior to delivery. The scale will record each weigh-in and will update the member's file automatically. Members must weigh-in a minimum of 4 times a month
- Members must engage with an assigned online Omada coach via a mobile application or web browser a minimum of 4 times a month

If members do not adhere to both of the requirements outlined above, the following month in which they are non-compliant, they will not be able to refill their weight loss prescription. Members will be required to complete the missing weigh-ins and/or online coaching engagement in order to refill their prescription.

Based on the above, communications are being updated and will be sent to members once finalized. Sample communications will be sent once finalized.

2025 Legislative Review:

Medical and Rx Reporting:

Consolidated Appropriation Act, 2021 (CAA)

Under Section 204 of Division BB, Title II (Section 204) of the Consolidated Appropriations Act, 2021 (CAA), group health plans and health insurance issuers offering group or individual health insurance coverage are required to submit information about prescription drugs and health care spending to the Department of Health and Human Services (HHS), the Department of Labor (DOL), and the Department of the Treasury. The center for Medicare & Medicaid Services (CMS) collects the data on behalf of the Departments and the Office of Personnel Management (OPM).

The data is due annually by June 1st. The SHIF has provided all carriers with the information needed to submit on behalf of the Fund.

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
01/30/2025	Medical/Aetna	SHIF 2025 01 07	Surgical Services	Overtured	03/12/2025
02/05/2025	Medical/Aetna	SHIF 2025 02 01	CT scan	Under Review	
02/11/2025	Medical/Aetna	SHIF 2025 02 02	DME Supplies	Upheld	02/15/2025
02/11/2025	Medical/Aetna	SHIF 2025 02 03	Anesthesia	Upheld	02/15/2025
02/14/2025	Medical/Aetna	SHIF 2025 02 04	Formula Coverage	Upheld	02/17/2025
02/28/2025	Medical/Aetna	SHIF 2025 02 06	Anesthesia	Upheld	03/10/2025
03/04/2025	Medical/Aetna	SHIF 2025 03 01	Formula Coverage	Under Review	
03/11/2025	Medical/Aetna	SHIF 2025 03 02	Surgical Services	Upheld	03/19/2025

IRO Submissions:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
01/30/2025	Medical/Aetna	SHIF 2025 01 07	Surgical Services	Overtured	03/12/2025
02/05/2025	Medical/Aetna	SHIF 2025 02 01	CT scan	Under Review	
03/04/2025	Medical/Aetna	SHIF 2025 03 01	Formula Coverage	Under Review	

03/11/2025	Medical/Aetna	SHIF 2025 03 02	Surgical Services	Upheld	03/19/2025
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Small Claim Committee Appeals: None



Schools Health Insurance Fund
 Board Meeting Summary
 March 26, 2025



REFERRALS	Current: 1/1/25 – 2/28/25	Previous: 1/1/24 – 2/29/24
Total Referrals	263	232
Total Referrals (ACUTE)	240	212
Total Referrals (COMPLEX)	23	20
Hospitalizations		
Total Members Hospitalized	164	160
Members Requiring ICU	16	11
Readmissions (Acute)	5	5
Complex Program Admissions/Readmissions	2/1	3/0
Mobilizations---Acute Program		
Inpatient Visits	144	140
Accompaniments	39	76
Home Visits	7	20
Mobilizations---Complex Program		
Inpatient Visits	3	2
Accompaniments	19	23
Home Visits	2	1
Acuity*	Acute/Chronic	Acute/Chronic
1	1/0	5/0
2	66 /20	46/17
3	156/1	150/3
4 ICU	16/1	11/0
ICU Admissions		
# of Admissions	16	11
Insurer	10 Aetna; 6 AmeriHealth	6 Aetna; 5 AmeriHealth
Status	14 Engaged; 2 unable to reach	11 Engaged

*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



Of Note This Reporting Period:

Referrals:

- Total 263 (12% increase from 2024)
- Inpatient referrals 164; 16 ICU admissions
 - 129 inpatients engaged – 79% engagement
 - 13 remain in outreach at time of this report
 - 14 of 16 ICU patients engaged; unable to reach 2 patients
 - Only 5 readmissions – a 3% readmission rate! With the average readmission for commercial insurance at 14%, we would anticipate 11 readmissions, 6 more than this reporting period's "actual." With an average cost of \$15,2000 per admission, the potential savings would be \$91,200.

Acute Program:

- 240 cases referred; 31 direct calls (13%)
- 190 mobilizations – 144 inpatients; 39 accompaniments; 7 home visits
- 159 of 209 adult members engaged; 76% supported
- 31 pediatric cases referred; 21 engaged; 68% supported
- During this time period there were 5 high claimants >\$100,000. GN engaged with 3 of the 5.

Complex Care Program

- 22 total referrals; 18 for diabetes management; 4 other complex diagnoses
- Referrals to the diabetic program – 1 MCC transfer from acute program; 17 identified on lab reports
- 8 of 22 referrals engaged; 36% supported; 3 remain in outreach at the time of this report
- 24 mobilizations – 3 inpatients; 19 accompaniments; 2 home visits
- GN Social Worker engaged with 3 members to address social determinants of health needs

In today's healthcare environment, excessive wait times to see providers often results in a delay in care. That delay can have egregious results. While this is only one aspect of barriers to getting needed healthcare, it is one that our MCCs face on a daily basis. Often appointments are months out and the nurses need to "work their magic" to secure expedited appointments.

These delays impact patients in several ways:

- **Delayed care:** Patients may postpone necessary medical checkups due to long wait times.
- **Frustration and inconvenience:** Waiting for appointments can be stressful and disrupt daily schedules.



Schools Health Insurance Fund
Board Meeting Summary
March 26, 2025



- **Potential for worsened health:** Delaying treatment for medical issues can lead to complications

Delayed treatment of medical issues can equate into complications resulting in unnecessary costly procedures and hospital admissions. The highlighted story illustrates how GN intervention can ultimately prevent further complications and potential costly hospitalization.

Highlighted Story:

MCC engaged with a 20-year-old patient who, standing at 5'10" and weighing 109 lbs, had been admitted to the hospital for norovirus. Previously, he had been under the care of a pediatric GI provider for malnutrition, but having recently aged out of pediatric care, he was now navigating the adult system. When he called to schedule a follow-up appointment, he was given a slot four months out! On a Friday afternoon, the MCC received a call requesting assistance in expediting the appointment. To add a bit of urgency, the patient was home on winter break for one more week before returning to college. Determined to resolve the issue, the MCC made it her mission to secure a GI appointment within the five business days the office would be open. By the following Monday afternoon, she had successfully secured an appointment with the same provider—originally scheduled for four months away—for the following Friday, ensuring the patient could get the support he needed heading back to school. This patient received appropriate care and counseling and has remained stable and hospital-free since his return to school.

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SCHOOL HEALTH INSURANCE FUND
ACH/WIRE BILLS LIST

MARCH 2025

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 24-25

<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
DELTA DENTAL INSURANCE CO (DELTACARE USA)	GLOUCESTER SSSD- # F1-7871700004 03/25	1,278.17
DELTA DENTAL INSURANCE CO (DELTACARE USA)	GLOUCESTER IOT A# F1-7871700003 03/25	528.79
		1,806.96
FLAGSHIP DENTAL PLANS	DEPTFORD TWP BOE GRP# 1309 03/25	2,408.53
FLAGSHIP DENTAL PLANS	LEAP ACADEMY- GRP # 1288 03/25	4,883.96
FLAGSHIP DENTAL PLANS	CINNAMINSON BOE GROUP 1165 03/25	367.15
FLAGSHIP DENTAL PLANS	CINNAMINSON BOE (COMP)- GRP 1166 03/25	1,817.48
		9,477.12
AETNA LIFE INSURANCE COMPANY	MEDICAL TPA 03/25	723,592.80
AETNA LIFE INSURANCE COMPANY	VISION TPA 03/25	630.63
		724,223.43
DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA FEES 03/25	21,332.58
		21,332.58
AMERIHEALTH ADMINISTRATORS	MEDICAL TPA FEES 03/25	184,825.54
		184,825.54
J. KENNETH HARRIS, ATTY AT LAW	PLAN DOCS 03/25	115.00
J. KENNETH HARRIS, ATTY AT LAW	MONTHLY ATTORNEY FEES 03/25	5,753.75
		5,868.75
VERRILL & VERRILL, LLC	TREASURER FEE 03/25	2,291.33
		2,291.33
CONNER STRONG & BUCKELEW	RX- PROG MGR FEES 03/25	84,884.59
CONNER STRONG & BUCKELEW	MEDICAL- PROG MGR FEES 03/25	547,470.25
CONNER STRONG & BUCKELEW	BROKER FEES 03/25	752,320.72
CONNER STRONG & BUCKELEW	DENTAL- PROGRAM MGR FEES 03/25	18,045.83
CONNER STRONG & BUCKELEW	HEALTH CARE REFORM 03/25	9,885.98
		1,412,607.37
CONNER STRONG & BUCKELEW	GUARDIAN NURSES 03/25	114,736.34
		114,736.34
	Total Payments FY 24-25	2,477,169.42
	TOTAL PAYMENTS ALL FUND YEARS	2,477,169.42

Chairperson

Attest: _____

Dated: _____

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

21 _____
Treasurer

SCHOOL HEALTH INSURANCE FUND
CHECKS BILLS LIST

MARCH 2025

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 24-25

<u>Vendor Name</u>	<u>Comment</u>	<u>InvoiceAmount</u>
EVERSIDE HEALTH, LLC	MEMBERSHIP- INV 406472 03/25	2,623.00 2,623.00
HORIZON BCBSNJ	MED TPA GRP # 8503Q & 8513R 03/25	826.58 826.58
PERMA RISK MANAGEMENT SERVICES	ADMINISTRATION FEE 03/25	247,932.36
PERMA RISK MANAGEMENT SERVICES	POSTAGE 02/25	71.34 248,003.70
MEDICAL EVALUATION SPECIALISTS	MES CASE 2642051 2/11/25	306.25
MEDICAL EVALUATION SPECIALISTS	MES CASE 2642057 2/11/25	306.25
MEDICAL EVALUATION SPECIALISTS	MES CASE 2642059 2/11/25	306.25
MEDICAL EVALUATION SPECIALISTS	MES CASE 2642046 2/11/25	306.25 1,225.00
HOSPITALITY MANAGEMENT SERVICES, INC	CATER 3/25 MEETING INV 86452	1,038.00 1,038.00
AETNA BEHAVIORAL HEALTH LLC	LEAP- INV E0340015 3/25 FOR APR 2025	470.00 470.00
ADVANTA HEALTH SOLUTIONS	FEB 25 MGMT FEE- LENAPE HIGH 02/01/25	2,033.75
ADVANTA HEALTH SOLUTIONS	DEC 24 INC. CREDITS- LENAPE HIGH 2/4/25	2,950.00
ADVANTA HEALTH SOLUTIONS	FEB 25 MGMT FEE- CHESTERFIELD 02/25	139.68
ADVANTA HEALTH SOLUTIONS	FEB 2025 MGMT FEE- WATCHUNG SD 2/1/25	36.00
ADVANTA HEALTH SOLUTIONS	FEB 25 MGMT FEE- SOMERSET HILLS 2/1/25	1,019.70
ADVANTA HEALTH SOLUTIONS	FEB 2025 MGMT FEE- BETHLEHEM TWP 2/1/25	190.40
ADVANTA HEALTH SOLUTIONS	NOV 24 INC CRED. CHESTERFIELD 2/1/25	170.00 6,539.53
MUNICIPAL REINSURANCE HIF	SPECIFIC REINSURANCE 03/25	1,184,014.00 1,184,014.00
	Total Payments FY 24-25	1,444,739.81
	TOTAL PAYMENTS ALL FUND YEARS	1,444,739.81

Chairperson

Attest:

Dated: _____

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

22 _____
Treasurer

SCHOOLS HEALTH INSURANCE FUND									
SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED									
Current Fund Year: 2024-25 Month Ending: January		Medical	Dental	Rx	Reinsurance	Admin	Closed Year	Retained Dividend	TOTAL
OPEN BALANCE	27,039,235.49	583,361.63	(17,927,399.32)	(852,006.31)	23,268,186.98	120,060,426.03	23,392,103.51	175,563,908.01	
RECEIPTS									
Assessments	38,111,232.96	349,363.37	3,991,877.20	930,558.34	2,992,643.13	0.00	0.00	46,375,675.00	
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Invest Pymnts	96,730.29	1,846.02	0.00	0.00	73,630.92	379,925.70	74,023.21	626,156.14	
Invest Adj	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.01	
Subtotal Invest	96,730.30	1,846.02	0.00	0.00	73,630.92	379,925.70	74,023.21	626,156.15	
Other *	1,806,662.81	0.00	1,659,770.77	0.00	0.00	0.00	0.00	3,466,433.58	
TOTAL	40,014,626.07	351,209.39	5,651,647.97	930,558.34	3,066,274.05	379,925.70	74,023.21	50,468,264.73	
EXPENSES									
Claims Transfers	47,924,635.64	347,500.66	7,926,791.65	0.00	0.00	0.00	0.00	56,198,927.95	
Expenses	5,246.00	10,630.10	0.00	1,179,765.20	2,836,686.32	0.00	0.00	4,032,327.62	
Other *	0.00	0.00	0.00	0.00	0.12	0.00	0.00	0.12	
TOTAL	47,929,881.64	358,130.76	7,926,791.65	1,179,765.20	2,836,686.44	0.00	0.00	60,231,255.69	
END BALANCE	19,123,979.92	576,440.26	(20,202,543.00)	(1,101,213.17)	23,497,774.59	120,440,351.73	23,466,126.72	165,800,917.05	

SCHOOLS HEALTH INSURANCE FUND										
ALL FUND YEARS COMBINED										
CURRENT MONTH										
January										
CURRENT FUND YEAR										
2024-25										
	Description:	Fulton Bank - General Account	Fulton Bank - Expense Account	Fulton Bank Investment Account	Ocean First Bank	Wilmington Trust Investment Account	New Jersey Cash Management Investment Account	Parke Bank Investment Account #8626	TD Bank Money Market Account	
	ID Number:									
	Maturity (Yrs)									
	Purchase Yield:	4.45	4.45	4.45	1.25	4.09	4.30	5.25	1.00	
	TOTAL for All Accts & instruments									
	Opening Cash & Investment Balance	\$ 175,563,908.01	\$ 24,590,172.24	\$ 620,510.43	\$ 85,538,274.93	\$ 39,959.89	\$ 993.45	\$ 64,255,991.25	\$ 507,073.99	\$ 10,931.83
	Opening Interest Accrual Balance	\$3.61	\$ -	\$ -	\$ -	\$ -	\$ 3.61	\$ -	\$ -	\$ -
1	Interest Accrued and/or Interest Cost	\$3.49	\$0.00	\$0.00	\$0.00	\$0.00	\$3.49	\$0.00	\$0.00	\$0.00
2	Interest Accrued - discounted Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3	(Amortization and/or Interest Cost)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4	Accretion	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5	Interest Paid - Cash Instr.s	\$626,152.54	\$42,192.39	\$12,694.90	\$332,696.56	\$42.44	\$0.00	\$236,255.98	\$2,260.99	\$9.28
6	Interest Paid - Term Instr.s	\$3.61	\$0.00	\$0.00	\$0.00	\$0.00	\$3.61	\$0.00	\$0.00	\$0.00
7	Realized Gain (Loss)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8	Net Investment Income	\$626,156.03	\$42,192.39	\$12,694.90	\$332,696.56	\$42.44	\$3.49	\$236,255.98	\$2,260.99	\$9.28
9	Deposits - Purchases	\$73,874,436.20	\$59,842,108.58	\$4,032,327.62	\$10,000,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10	(Withdrawals - Sales)	-\$84,263,583.31	-\$70,231,255.57	-\$4,032,327.62	-\$10,000,000.00	\$0.00	-\$0.12	\$0.00	\$0.00	\$0.00
			OK	OK	OK	OK	OK	OK	OK	OK
	Ending Cash & Investment Balance	\$165,800,917.05	\$14,243,217.64	\$633,205.33	\$85,870,971.49	\$40,002.33	\$996.94	\$64,492,247.23	\$509,334.98	\$10,941.11
	Ending Interest Accrual Balance	\$3.49	\$0.00	\$0.00	\$0.00	\$0.00	\$3.49	\$0.00	\$0.00	\$0.00
	Plus Outstanding Checks	\$3,099,912.32	\$1,549,956.16	\$1,549,956.16	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	(Less Deposits in Transit)	-\$1,549,956.16	\$0.00	-\$1,549,956.16	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Balance per Bank	\$167,350,873.21	\$15,793,173.80	\$633,205.33	\$85,870,971.49	\$40,002.33	\$996.94	\$64,492,247.23	\$509,334.98	\$10,941.11

**CERTIFICATION AND RECONCILIATION OF CLAIMS PAYMENTS AND RECOVERIES
SCHOOLS HEALTH INSURANCE FUND**

Month		January							
Current Fund Year		2017							
		1.	2.	3.	4.	5.	6.	7.	8.
Policy Year	Coverage	Calc. Net	Monthly	Monthly	Calc. Net	TPA Net	Variance	Delinquent	Change
		Paid Thru Last Month	Net Paid January	Recoveries January	Paid Thru January	Paid Thru January	To Be Reconciled	Unreconciled Variance From	This Month
2024-25	Medical	276,481,063.62	47,924,635.64	0.00	324,405,699.26	0.00	324,405,699.26	276,481,063.62	47,924,635.64
	Dental	2,538,512.44	347,500.66	0.00	2,886,013.10	0.00	2,886,013.10	2,538,512.44	347,500.66
	Rx	50,428,993.85	7,926,791.65	0.00	58,355,785.50	0.00	58,355,785.50	50,428,993.85	7,926,791.65
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	329,448,569.91	56,198,927.95	0.00	385,647,497.86	0.00	385,647,497.86	329,448,569.91	56,198,927.95

HARRIS LAW OFFICES

SHIF BOARD OF TRUSTEES

J. Kenneth Harris, Esq.

SHIF Executive Director

Date: March 24, 2025

Subject: March 2025 Meeting Attorney Report

Update re TPA RFPs

The SNJ Fund, as Lead Agency for the 297HICPS, submitted an RFP for AmeriHealth or equivalent third party administrator (“TPA”) services to the Office of the State Comptroller (“OSC”) on May 29, 2024, and one for Aetna or equivalent on June 10, 2024. The OSC was advised that the two RFPs were identical in terms with the exception of the provider network that was referenced. Initial responses were received from OSC on June 18, 2024, for the AmeriHealth RFP and on June 25, 2024, for the Aetna RFP. Subsequently, the OSC interviewed Mr. Lodics, as the Executive Director and Sean Canning as the Qualified Purchasing Agent (“QPA”), in August 2024. Continuing exchanges with the OSC have continued since that date including them serving a document production request for documents in 69 different categories for the time period starting January 1, 2021, through October 2024. The latest exchange with the OSC included a 17-page letter of March 7, 2025, which contained 108 so-called “Draft Findings of Fact”. Counsel for PERMA and for the SHIF are in the process of responding to this letter and have received an extension until March 28, 2025, to supply the response. I have reviewed an initial draft response prepared by counsel for PERMA which, in my view, accurately states that the letter fails to provide the affected parties with appropriate notice of the actual contents of OSC’s planned report.

Additionally, while the OSC’s charge is to review procurements for compliance with applicable procurement laws, “...it appears that the OSC has been conducting an investigation of the HIFs and their vendors, without providing appropriate notice to the affected parties, and now apparently intends to issue a public report that has little to do with the proposed procurements themselves and much to do with the HIFs’ vendors.”

The most recent correspondence from the OSC re the RFPs was dated February 25th and 27th, respectively for the AmeriHealth and Aetna RFPs and I responded to those comments on March 17, 2025.

At this point in time, we still do not have a definite date when we anticipate receiving approval to release the pending RFPs. We have notified the OSC that they have not complied with their statutory obligation to notify us that we are in compliance with applicable procurement laws or, provide specific reasons and applicable sections of the procurement law where there is non-compliance. Accordingly, under the statute we could proceed with the issuance of the pending RFPs. However, at this time the alternate approach of issuing the RFPs at the individual HIF level seems to be preferable alternative.

Lastly, the SHIF previously authorized the hiring of Eric Moran of Epstein Becker & Green to represent the SHIF and its chairperson, Mr. Collins, during the interview process and other issues pertaining to the SHIF with the OSC. Mr Moran has changed firms and is now working at Greenberg Traurig, whose office is in Florham Park, NJ. The firm has been in New Jersey since 2002 and has 65 attorneys in the New Jersey office. I recommend that we continue to retain Mr. Moran as the attorney for this matter. He has informed me that the billing terms will remain as they are and will not be changed due to his working at a new firm.

Other matters of interest: On March 20, 2025, HHS posted an online database for searching for contaminants in foods. It is called the “Chemical Contaminants Transparency Tool” (“CCT Tool”) and can be found either by going to the HHS website or using your web browser to find the term. It enables you to determine whether any specific food has any type of contaminant and if it is at a harmful level.



SCHOOLS HEALTH INSURANCE FUND

Monthly Claim Activity Report

March 26, 2025



SCHOOLS HEALTH INSURANCE FUND

	<u>MEDICAL CLAIMS PAID 2023-2024</u>	<u># OF EES</u>	<u>PER EE</u>	<u>MEDICAL CLAIMS PAID 2024-2025</u>	<u># OF EES</u>	<u>PER EE</u>
JULY	\$26,217,206	17,767	\$1,476	\$38,797,567	19,761	\$1,963
AUGUST	\$34,693,037	17,580	\$1,973	\$36,500,908	19,558	\$1,866
SEPTEMBER	\$30,707,053	18,001	\$1,706	\$33,695,184	19,940	\$1,690
OCTOBER	\$35,222,685	17,972	\$1,960	\$41,785,038	19,992	\$2,090
NOVEMBER	\$29,759,718	17,954	\$1,658	\$38,020,508	19,923	\$1,908
DECEMBER	\$28,202,183	17,978	\$1,569	\$39,989,716	19,934	\$2,006
JANUARY	\$36,746,771	18,202	\$2,019	\$35,748,691	21,134	\$1,692
FEBRUARY	\$31,804,010	18,208	\$1,747			
MARCH	\$29,422,005	18,254	\$1,612			
APRIL	\$39,304,858	18,260	\$2,153			
MAY	\$32,263,848	18,173	\$1,775			
JUNE	\$32,081,607	18,225	\$1,760			
TOTALS	\$386,424,981			\$264,537,611		
				2024-2025 Avg.	20,035	\$ 1,888
				2023-2024 Avg.	18,048	\$ 1,784

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

Paid Amt	Diagnosis/Treatment
\$592,764.98	ENCOUNTER FOR ANTINEOPLASTIC
\$527,277.70	ENCOUNTER FOR ANTINEOPLASTIC
\$434,650.50	CONGENITAL DIAPHRAGMATIC HERNIA
\$245,399.90	AMYOTROPHIC LATERAL SCLEROSIS
\$175,560.59	NECROSIS OF AMPUTATION STUMP, RIGHT LOWER
\$159,586.48	SEPSIS, UNSPECIFIED ORGANISM
\$155,602.08	OTHER GRAM-NEGATIVE SEPSIS
\$149,822.78	ACUTE BRONCHIOLITIS DUE TO RESPIRATORY
\$142,173.43	MYELODYSPLASTIC SYNDROME, UNSPECIFIED
\$138,939.13	MULTIPLE SCLEROSIS
\$137,932.28	MULTIPLE SCLEROSIS
\$130,672.42	NONRHEUMATIC AORTIC (VALVE) STENOSIS
Total:	
\$2,990,382.27	



Schools Health Insurance Fund 2/1/24 through 1/31/25 (Unless otherwise noted)

Dashboard

Medical Claims Paid Per Employee
July 2024 – January 2025
Total Medical Paid per Employee:
\$1,888

Network Discounts

Inpatient:	66.7%
Ambulatory:	69.7%
Physician/Other:	61.8%
TOTAL:	65.9%

Provider Network

% Admissions In-Network:	97.5%
% Physician Office:	97.4%

Aetna Book of Business:
Admissions 97.9%; Physician 91.8%

Top Facilities Utilized
(by total Medical Spend)

- Virtua-West Jersey
- Morristown Medical Center
- CHOP
- Cooper
- Inspira Medical Center- Mullica Hill

Catastrophic Claim Impact
(January 2025-January 2025)

Number of Claims Over \$50,000: **58**
 Claimants per 1000 members: **1.0**
 Avg. Paid per Claimant: **\$107,874**
 Percent of Total Paid: **16.6%**

- Aetna BOB- HCC account for an average of 43.6% of total Medical Cost

Aetna One Flex Member Outreach:
Through January 2025

Total Members Identified: **10,578**
 Members Targeted for 1:1 Nurse Support : **3,280**
 Members Targeted for Digital Activity: **7,298**
 Member 1:1 outreach completed: **2,727**
 Member 1:1 Outreach in Progress: **919**

Teladoc Activity:
January 2025– January 2025

Total Registrations: **232**
 Total Online Visits: **644**
 Total Net Claims Savings: **\$308,510**
 Total Visits w/ Rx: **473**

Mental Health Visits: 83
Dermatology Visits: 17

Service Center Performance Goal Metrics YTD 2025

Customer Service Performance

1 st Call Resolution:	93.68%
Abandonment Rate:	0.33%
Avg. Speed of Answer:	12.6 sec

Claims Performance

Financial Accuracy:	98.68%*
<small>*Q2 2024</small>	
-	
90% processed w/in:	6.9 days
95% processed w/in:	12.7 days

Claims Performance (Monthly)
(January 2025)

90% processed w/in:	6.9 days
95% processed w/in:	12.7 days

(Note: This is not a PG metric)

Performance Goals

1 st 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 2024-2025	# of EE's 2024-2025	PER EE		Medical Claim 2023-2024	# of EE'S 2023-2024	PER EE
JULY	\$4,950,061.74	4910	\$1,008.15	JULY	\$4,589,904.30	3755	\$1,222.34
AUGUST	\$10,720,141.51	4909	\$2,183.77	AUGUST	\$8,652,996.19	3765	\$2,298.27
SEPTEMBER	\$8,847,652.65	5045	\$1,753.74	SEPTEMBER	\$4,873,056.22	3882	\$1,255.29
OCTOBER	\$10,365,262.03	5060	\$2,048.47	OCTOBER	\$5,985,020.41	3873	\$1,545.31
NOVEMBER	\$8,653,427.84	5056	\$1,711.51	NOVEMBER	\$6,788,857.02	3888	\$1,746.10
DECEMBER	\$8,567,222.40	5071	\$1,689.45	DECEMBER	\$6,076,974.81	3904	\$1,556.60
JANUARY	\$10,286,018.55	5044	\$2,039.25	JANUARY	\$6,149,354.18	3905	\$1,574.73
FEBRUARY	\$9,079,184.66	5044	\$1,799.99	FEBRUARY	\$8,222,263.53	3899	\$2,108.81
MARCH				MARCH	\$5,936,260.78	3920	\$1,514.35
APRIL				APRIL	\$7,463,905.23	3932	\$1,898.24
MAY				MAY	\$6,994,148.83	3933	\$1,778.32
JUNE				JUNE	\$8,967,219.69	3928	\$2,282.89
TOTALS	\$71,468,971.38			TOTAL	\$80,699,961.19		
	AVERAGE	5017	\$1,779.29		AVERAGE	3882.00	\$1,731.77



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

Group: Schools Health Insurance Fund
Paid Dates: 2/1/25-2/28/25
Network Service: ALL

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

Claimant	Relationship	Paid Amount	Diagnosis
1	dependent	\$112,749	Other Nervous System Disorders (Often Hereditary Or Degenerative)
2	spouse	\$116,124	Gastrointestinal Cancers - Bile Duct
3	employee	\$123,081	Diverticulosis And Diverticulitis
4	Spouse	\$131,016	Head And Neck Cancers - All Other Types
5	dependent	\$266,169	Liveborn
6	dependent	\$939,009	Respiratory Failure; Insufficiency; Arrest
Total		\$1,688,148.92	

Average payment per member PMPM 7/1/24- 6/30/25	\$702.33	Metric	AHA January MTD	AHA February MTD
Number of claimants with paid claims over \$100,000 for YTD	60	1st Call Resolution		
Total paid on those claimants:	\$14,699,721.85	ASA	79.57	29.07
		Abandonment Rate	3.64%	1.67%
Top Facilities Utilized based on paid claims:				
VIRTUA WEST JERSEY HEALTH SYSTEM INC, NJ				
HOSPITAL OF THE UNIV OF PENNSYLVANIA, PA		Totals	2024-25 YTD	
KENNEDY UNIVERSITY HOSPITAL GAC, NJ		Total Inpatient Admissions	379	
COOPER UNIVERSITY HOSPITAL, NJ		Total Inpatient Days	1,741	
CHILDRENS HOSPITAL OF PHILADELPHIA, PA		Total ER visits	1,431	
TELADOC UTILIZATION				
Total Behavioral Health Visits				
Total Medical Visits YTD				
Member Satisfaction YTD:				
Provider Network				
% Inpatient In- Network: 99.3%				
% Professional providers In-Network: 92.2%				
% Outpatient providers In-Network- 94.3%				



EXPRESS SCRIPTS®

School Health Insurance Fund

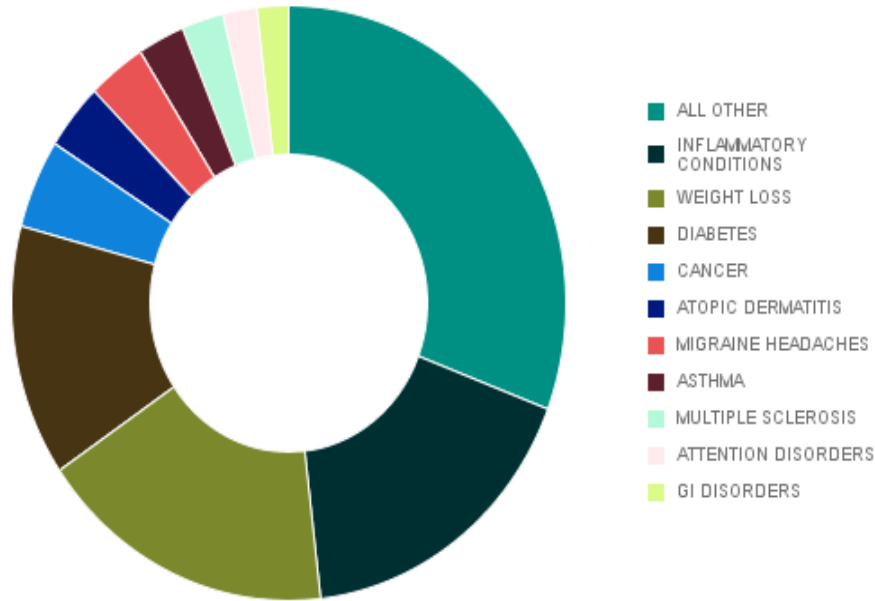
Total Component/Date of Service (Month)	2024 01	2024 02	2024 03	2024 Q1	2024 04	2024 05	2024 06	2024 Q2	2024 07	2024 08	2024 09	2024 Q3	2024 10	2024 11	2024 12	2024 Q4
Membership	27,349	27,354	27,447	27,383	27,458	27,548	27,564	27,523	33,591	33,602	33,865	33,686	33,911	33,868	33,967	33,915
Total Days	1,055,642	986,897	1,026,430	3,068,969	1,049,796	1,043,879	1,014,504	3,108,179	1,268,220	1,238,671	1,173,777	3,680,668	1,290,137	1,213,126	1,306,783	3,810,046
Total Patients	12,137	11,847	11,952	17,516	11,861	11,890	11,602	16,954	13,992	14,071	14,040	20,757	15,469	14,866	15,187	22,014
Total Plan Cost	\$5,250,414	\$5,146,559	\$5,152,467	\$15,549,440	\$5,971,924	\$6,525,677	\$6,014,152	\$18,511,752	\$7,813,937	\$8,339,411	\$7,569,570	\$23,722,918	\$9,019,337	\$8,403,760	\$8,494,051	\$25,917,148
Generic Fill Rate (GFR) - Total	87.2%	87.6%	87.6%	87.4%	87.3%	86.6%	86.3%	86.7%	85.6%	84.3%	80.8%	83.6%	78.7%	82.6%	85.2%	82.1%
Plan Cost PMPM	\$191.98	\$188.15	\$187.72	\$189.28	\$217.49	\$236.88	\$218.19	\$224.19	\$232.62	\$248.18	\$223.52	\$234.75	\$265.97	\$248.13	\$250.07	\$254.72
Total Specialty Plan Cost	\$2,169,051	\$2,137,419	\$1,987,335	\$6,293,805	\$2,590,553	\$2,891,606	\$2,382,694	\$7,864,853	\$3,177,157	\$3,570,911	\$3,113,312	\$9,861,381	\$3,909,497	\$3,797,096	\$3,534,183	\$11,240,776
Specialty % of Total Specialty Plan Cost	41.3%	41.5%	38.6%	40.5%	43.4%	44.3%	39.6%	42.5%	40.7%	42.8%	41.1%	41.6%	43.3%	45.2%	41.6%	43.4%

Total Component/Date of Service (Month)	2025 01	2025 02	2025 03	2025 Q1	2025 04	2025 05	2025 06	2025 Q2	2025 07	2025 08	2025 09	2025 Q3	2025 10	2025 11	2025 12	2025 Q4
Membership	34,866															
Total Days	1,361,733															
Total Patients	15,763															
Total Plan Cost	\$8,013,660															
Generic Fill Rate (GFR) - Total	86.8%															
Plan Cost PMPM	\$229.84															
% Change Plan Cost PMPM	19.7%															
Total Specialty Plan Cost	\$3,391,218															
Specialty % of Total Specialty Plan Cost	42.3%															

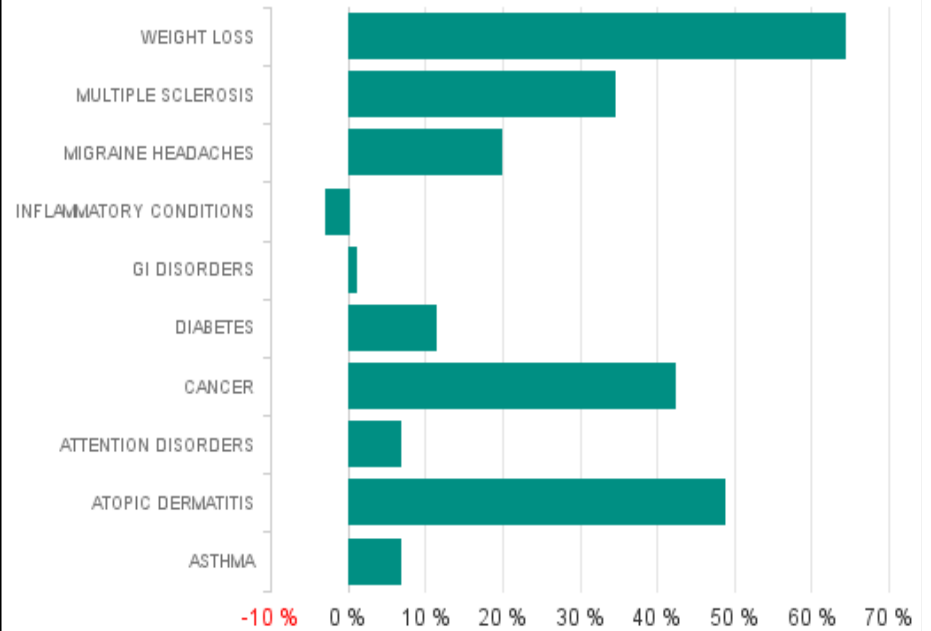
Top Indications

SCHOOL ALLIANCE INS FUND (Current Period 01/2025 - 02/2025 vs. Previous Period 01/2024 - 02/2024) Peer = Government - National Preferred Formulary

Top Indications by Plan Cost



Plan Cost PMPM Trend



			Current Period						Previous Period						Trend
Rank	Peer Rank	Indication	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Plan Cost PMPM
1	2	INFLAMMATORY CONDITIONS	25.4 %	835	\$2,682,682	\$38.47	36.6 %	31.8 %	31.5 %	659	\$2,169,457	\$39.66	34.4 %	36.4 %	-3.0 %
2	4	WEIGHT LOSS	24.9 %	2,474	\$2,631,428	\$37.73	2.0 %	4.6 %	18.3 %	1,223	\$1,257,124	\$22.98	4.3 %	6.2 %	64.2 %
3	1	DIABETES	19.6 %	6,089	\$2,073,709	\$29.74	28.4 %	24.6 %	21.2 %	4,832	\$1,462,703	\$26.74	30.6 %	26.4 %	11.2 %
4	3	CANCER	6.9 %	390	\$733,272	\$10.51	83.6 %	76.8 %	5.9 %	300	\$404,250	\$7.39	89.3 %	77.1 %	42.3 %
5	5	ATOPIC DERMATITIS	5.2 %	1,117	\$553,511	\$7.94	82.4 %	81.9 %	4.2 %	844	\$292,161	\$5.34	87.4 %	85.9 %	48.6 %
6	6	MIGRAINE HEADACHES	4.8 %	817	\$510,387	\$7.32	44.8 %	52.4 %	4.9 %	652	\$334,500	\$6.11	49.7 %	53.6 %	19.7 %
7	7	ASTHMA	4.0 %	3,860	\$421,745	\$6.05	85.3 %	88.8 %	4.5 %	3,361	\$309,700	\$5.66	83.1 %	88.1 %	6.8 %
8	8	MULTIPLE SCLEROSIS	3.5 %	44	\$369,813	\$5.30	22.7 %	49.0 %	3.1 %	40	\$215,686	\$3.94	30.0 %	46.6 %	34.5 %
9	10	ATTENTION DISORDERS	2.8 %	3,079	\$300,499	\$4.31	89.5 %	92.2 %	3.2 %	2,301	\$220,938	\$4.04	86.0 %	87.0 %	6.7 %
10	9	GI DISORDERS	2.7 %	521	\$281,428	\$4.04	57.0 %	58.2 %	3.2 %	401	\$218,542	\$4.00	49.9 %	56.6 %	1.0 %
Total Top 10				19,226	\$10,558,474	\$151.40	52.3 %	55.0 %		14,613	\$6,885,060	\$125.86	55.2 %	55.2 %	20.3 %

Top Drugs

SCHOOL ALLIANCE INS FUND (Current Period 01/2025 - 02/2025 vs. Previous Period 01/2024 - 02/2024) Peer = Government - National Preferred Formulary

					Current Period				Previous Period				Trend
Rank	Peer Rank	Brand Name	Indication	Specialty Drug	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Plan Cost PMPM
1	8	ZEPBOUND	WEIGHT LOSS	N	1,398	718	\$1,378,470	\$19.77	579	284	\$554,454	\$10.14	95.0 %
2	12	WEGOVY	WEIGHT LOSS	N	1,008	542	\$1,247,829	\$17.89	560	261	\$686,720	\$12.55	42.5 %
3	2	OZEMPIC	DIABETES	N	574	262	\$519,886	\$7.45	420	191	\$358,972	\$6.56	13.6 %
4	6	STELARA	INFLAMMATORY CONDITIONS	Y	50	23	\$517,539	\$7.42	44	20	\$424,044	\$7.75	-4.3 %
5	1	MOUNJARO	DIABETES	N	499	225	\$494,725	\$7.09	269	130	\$257,624	\$4.71	50.6 %
6	9	DUPIXENT PEN	ATOPIK DERMATITIS	Y	108	49	\$346,342	\$4.97	61	28	\$157,303	\$2.88	72.7 %
7	13	SKY RIZI PEN	INFLAMMATORY CONDITIONS	Y	56	19	\$301,895	\$4.33	47	16	\$248,732	\$4.55	-4.8 %
8	22	HUMIRA (CF) PEN	INFLAMMATORY CONDITIONS	Y	45	19	\$230,289	\$3.30	101	38	\$511,604	\$9.35	-64.7 %
9	16	RINVOQ	INFLAMMATORY CONDITIONS	Y	45	19	\$222,177	\$3.19	26	12	\$114,644	\$2.10	52.0 %
10	10	JARDIANCE	DIABETES	N	382	157	\$222,153	\$3.19	282	118	\$158,492	\$2.90	9.9 %
11	26	TALTZ AUTOINJECTOR	INFLAMMATORY CONDITIONS	Y	39	16	\$194,534	\$2.79	27	10	\$125,479	\$2.29	21.6 %
12	28	OTEZLA	INFLAMMATORY CONDITIONS	Y	42	17	\$158,561	\$2.27	23	11	\$70,732	\$1.29	75.8 %
13	30	NURTEC ODT	MIGRAINE HEADACHES	N	99	71	\$154,179	\$2.21	64	45	\$83,092	\$1.52	45.5 %
14	15	TREMFYA	INFLAMMATORY CONDITIONS	Y	29	14	\$149,562	\$2.14	26	12	\$119,541	\$2.19	-1.9 %
15	43	UBRELVY	MIGRAINE HEADACHES	N	106	80	\$126,850	\$1.82	70	53	\$77,962	\$1.43	27.6 %
16	157	MAVENCLAD	MULTIPLE SCLEROSIS	Y	2	1	\$125,600	\$1.80	NA	NA	NA	NA	NA
17	23	FARXIGA	DIABETES	N	225	93	\$123,530	\$1.77	142	58	\$76,247	\$1.39	27.1 %
18	35	SKY RIZI ON-BODY	INFLAMMATORY CONDITIONS	Y	12	6	\$113,414	\$1.63	6	3	\$42,371	\$0.77	110.0 %
19	21	ENBREL SURECLICK	INFLAMMATORY CONDITIONS	Y	21	9	\$113,188	\$1.62	12	6	\$58,470	\$1.07	51.8 %
20	158	ZEPOSIA	MULTIPLE SCLEROSIS	Y	18	6	\$112,581	\$1.61	3	1	\$18,863	\$0.34	368.2 %
21	40	LISDEXAMFETAMINE DIMESYL	ATTENTION DISORDERS	N	363	236	\$111,243	\$1.60	134	89	\$37,750	\$0.69	131.2 %
22	41	QULIPTA	MIGRAINE HEADACHES	N	100	50	\$106,244	\$1.52	57	32	\$56,082	\$1.03	48.6 %
23	32	DUPIXENT SYRINGE	ATOPIK DERMATITIS	Y	42	16	\$105,372	\$1.51	34	14	\$91,065	\$1.66	-9.2 %
24	57	OMNIPOD 5 DEXG7G6 PODS (DIABETES	N	142	54	\$99,598	\$1.43	81	34	\$56,304	\$1.03	38.8 %
25	58	XOLAIR	ASTHMA	Y	38	15	\$80,411	\$1.15	10	5	\$17,241	\$0.32	265.8 %
Total Top 25					5,443		\$7,356,172	\$105.48	3,078		\$4,403,788	\$80.50	31.0 %



Paid Claims by Procedure Category

Procedure Category	2022	2023	2024	Book of Business
Diagnostic	27.6%	28.3%	28.9%	25.8%
Preventive	26.1%	26.0%	26.1%	21.5%
Restorative	12.1%	12.5%	11.9%	12.1%
Crowns/Inlays	13.5%	12.6%	12.7%	11.4%
Endodontic	6.1%	5.8%	6.2%	5.3%
Periodontal	2.6%	2.1%	2.3%	4.4%
Prosthodontics (removable)	1.1%	0.9%	0.6%	0.9%
Prosthodontics (fixed)	1.1%	1.2%	1.0%	3.8%
Oral Surgery	4.1%	4.3%	4.3%	6.1%
Orthodontic	3.8%	4.0%	3.7%	6.0%
Miscellaneous	2.0%	2.3%	2.4%	2.5%

Definitions for each 'Procedure Category' are in the Glossary.

**SCHOOLS HEALTH INSURANCE FUND
CONSENT AGENDA
MARCH 26, 2025**

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

Motion _____

Second _____

Resolution 7-25: 2025-2026 Budget Adoption	Page 43
Resolution 8-25: New Member Approval	Page 44
Resolution 9-25: Approval to Hire EUS: Medical TPA and PBM	Page 45
Resolution 10-25: March 2025 Bills List	Page 46

RESOLUTION NO. 7-25

**SCHOOLS HEALTH INSURANCE FUND
ADOPTION OF THE 2025-2026 BUDGET**

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

WHEREAS, the Board of Trustees met on February 26, 2025 in Public Session to introduce the proposed budget for 2025-2026 Fund Year; and

WHEREAS, the Board of Trustees met on March 26, 2025 in Public Session to adopt the proposed budget for 2025-2026 Fund Year; and

WHEREAS, a public hearing to adopt the 2025-2026 budget was held on March 26, 2025 at 12:00 pm at the Community House of Moorestown.

NOW THEREFORE BE IT RESOLVED that the Board of Trustees of the Schools Health Insurance Fund hereby adopt the 2025-2026 budget in the amount of \$775,877,418.

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: March 26, 2025

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

RESOLUTION NO. 8-25

**SCHOOLS HEALTH INSURANCE FUND
RESOLUTION AUTHORIZING THE HIRING
OF INSURANCE THROUGH THE EXTRAORDINARY UNSPECIFIED SERVICES PROCESS**

WHEREAS, the Schools Health Insurance Fund (Hereinafter the “Fund”) has a need for the following services to be provided for the efficient operation of the Fund;

Medical TPA
Pharmacy Benefit Manager

WHEREAS, the Fund wishes to initiate an Extraordinary Unspecified Service RFP which satisfies the fair and open requirement as established under (N.J.S.A. 18A: 18A-22(a) Seq.), and

WHEREAS, as per statute the process will be administered by the Qualified Purchasing Agent (N.J.S.A. 18A: 18A-22(a) Seq.),

NOW, THEREFORE, BE IT RESOLVED by the Executive Committee of the Schools Health Insurance Fund resolves to authorize the release of an RFP for:

Medical TPA
Pharmacy Benefit Manager

SCHOOLS HEALTH INSURANCE FUND

ADOPTED: March 26, 2025

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

RESOLUTION NO. 9-25

**SCHOOLS HEALTH INSURANCE FUND
RESOLUTION TO OFFER MEMBERSHIP**

WHEREAS, a number of local boards of education in the state of New Jersey have joined together to form a School Board Joint Insurance Fund, under the name of the Schools Health Insurance Fund (the “Fund”), as permitted by law; and

WHEREAS, the Fund held a Public Meeting on **March 26, 2025** for the purposes of conducting the official business of the Fund; and

WHEREAS, the Executive Director and Actuary of the Fund has reviewed the risk, underwriting detail, and actuarial projections for the entities listed below and recommend offers of membership; and

WHEREAS, the Risk Management Plan includes a cap of new membership at 20% of the prior year’s membership in one Fund Year;

WHEREAS, the Operations Committee has reviewed the following new member submissions and has approved membership to the School Boards that submit a fully executed Indemnity and Trust agreement to join the Fund.

1. Morris County VoTech– Effective 6/1/2025– Medical & Rx

BE IT RESOLVED, it has been determined that the admission to membership in the Fund of the above mentioned school boards would be in the best interests of the Fund and the inclusion of the entity in the Fund is consistent with the Fund’s By-laws;

BE IT RESOLVED, that the Schools Health Insurance Fund hereby offers membership to the above mentioned entity’s for medical, prescription, and/or dental coverage, contingent upon receipt of the Fund’s authorizing resolution to join the Fund and its executed Indemnity and Trust agreement.

ADOPTED: MARCH 26, 2025

BY: _____
CHAIRPERSON

ATTEST: _____
SECRETARY

RESOLUTION NO. 10-25

**SCHOOLS HEALTH INSURANCE FUND
APPROVAL OF MARCH 2025 BILLS LIST AND TREASURERS REPORT**

WHEREAS, the **Schools Health Insurance Fund** (the “Fund”) held a Public Meeting on **March 26, 2025** for the purposes of conducting the official business of the Fund; and

WHEREAS, The Treasurer for the Fund presented bills lists to satisfy outstanding costs incurred for operating the Fund during the months of March 2025 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 January 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 March 2025 bills list 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: MARCH 26, 2025

BY: _____
CHAIRPERSON

ATTEST: _____
SECRETARY

APPENDIX I

**SCHOOLS HEALTH INSURANCE FUND
OPEN MINUTES
FEBRUARY 26, 2025
MOORESTOWN COMMUNITY HOUSE
12:00 PM**

**MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ BY CHAIRMAN
ROLL CALL 2024-2025 BOARD OF TRUSTEES**

Trustee	BOE		
Joseph Collins	Delsea Regional BOE	Chairman	Present
Beth Ann Coleman	Collingswood BOE	Secretary	Present
Christopher Lessard	Frankford Township BOE		Present
Evon Digangi	Medford Twp BOE		Present
Nicholas Bice	Burlington Township BOE		Present
Jason Schimpf	Kingsway Regional School District		Present
Helen Haley	Voorhees Township BOE		Absent
John Bilodeau	Gloucester Twp BOE		Present
Fran Adler	Clayton BOE		Present
Katie Blew	North Hunterdon-Voorhees Regional HS		Absent
Derek Jess	Summit BOE		Absent
Scott Kipers	Black Horse Pike BOE		Present
Stephen Jakubowski	West Deptford BOE		Present
Janice Grassia	Gateway/Woodbury Heights BOE		Present
Donna DiLapo	Mt. Holly BOE		Present

FUND ADMINISTRATOR:

PERMA Risk Management

Brandon Lodics, Executive Director
Emily Koval, Associate Executive Director
Jordyn Robinson, Assistant Account Manager

PROGRAM MANAGER:

Conner Strong & Buckelew

Crystal Bailey

FUND ATTORNEY:

Ken Harris

FUND TREASURER:

Lorraine Verrill

FUND ACTUARY:

Absent

FUND AUDITOR:

Dennis Skalkowski

MEDICAL TPA AETNA:

Jason Silverstein

MEDICAL TPA AMERIHEALTH:

Kristina Strain

MEDICAL TPA HORIZON: Absent

EXPRESS SCRIPTS: Charles Yuk

DELTA DENTAL Crista O'Donnell

GUARDIAN NURSES: Jen White

Others present:

Danielle Dolci	Barb Farquhar	Scott Hogan
Jason Edleman	Ed Snyder	Scott Davenport
Tyler Jackson	John Deserabul	Kim Porter
Michael Zangrilli	Rob Watcher	Chuck Grande
Ken Verrill	Dina Murray	Anthony Tonzini
Susan Panto	Jacque Maddren	John Ogunkanmi
Kelli Axner	Mellissa Appleby	John Lajewski
Mario Karcic	Ian Dalton	Jolene Colantonio
Joe Madera	Tim Stys	Joel Sand
Constance Stewert	Matt Rudman	Amy Lerher
Tricia Malady	Stella Riginos	

MOTION TO APPROVE OPEN MINUTES OF December 4, 2024

Moved: Commissioner Bilodeau
Second: Commissioner Coleman
Vote: Unanimous

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

Moved: Commissioner Coleman
Second: Commissioner Bice
Vote: Unanimous

EXECUTIVE DIRECTORS REPORT

Fast Track Financial Reports - Mr. Lodics reviewed the financial fast track report for the months of November and December 2024. He stated that there was a slight deficit for November but a surplus gain in December. He stated that Claims are running 2% above what was budgeted. He stated that stop loss reimbursements have been materialized in November and December but not yet realized. The fund will see this reimbursement on future fast tracks. He stated that the claims utilization spike and higher claims amounts are due to the pharmacy market, and major contract negotiations with hospitals causing higher inpatient costs. Mr. Lodics stated that it was recommended and agreed upon by the Finance Committee that there will be no dividend declared this year due to the surplus as of the end of December.

2025-2026 BUDGET INTRODUCTION - Mr. Lodics stated that 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 overall budget increase is +10%.

He did a quick review of the budget presentation that was handed out at the meeting and sent as an attachment.

Mr. Lodics opened the floor for any questions on the 2025-2026 SHIF budget presented.

Schools Health Insurance Fund 2025/2026 Proposed Renewal	
Medical	EHP/GSP +7.1% All Others +12%
Prescription	EHP/GSP +20.4% All Others +27.0%
Dental PPO	+3.0%
Considerations	<ul style="list-style-type: none"> - Aligns renewal with performance - Payroll contribution consideration - Groups with lower EHP/GSP enrollment receive higher renewal - Market approach - Group Renewal Range: +4.9% to +14.9%

2025/2026 SHIF Renewal Statistics	
Average Renewal for entity with Medical	9.4%
Median Renewal for entity with Medical	9.8%
Average Renewal for entity with Medical and Rx	12.0%
Median Renewal for entity with Medical and Rx	11.6%

MOTION: Motion to approve Resolution 1-25 introducing the 2025-2026 Schools Health Insurance Fund budget in the amount of \$775,877,418 as per the recommendation of the Finance Committee and hold a public hearing on March 26, 2025 at the Moorestown Community House at 12:00pm.

Moved: Commissioner Bilodeau
Second: Commissioner Schimpf
Vote: Unanimous

2023-2024 SHIF AUDIT - Mr. Lodics state that the Fund received the Finance Committee authorization to approve and finalize the 2023-2024 Fund Audit. Resolution 2-25 approves ratifies this approval and a certification is included for each Committee Member to sign. This will be filed with the state.

MOTION: *Motion to approve Resolution 2-25 approving the final 2023-2024 Fund Year Audit as per the recommendation of the Finance Committee.*

Moved:	Commissioner Coleman
Second:	Commissioner Bice
Abstain:	Trustee DiGangi
Vote:	Unanimous

FUND QPA

Last year, the Fund approved a release of quotes for the QPA at the local Fund through the end of 2024. We recommend continuing the services of a QPA for the RFPs to go out this year, particularly for some of the larger contracts. Due to the expected cost of the QPA, we are requesting to go out for quotes for 2025.

MOTION: *Motion to allow PERMA to go out for quotes for QPA services.*

Moved:	Commissioner Coleman
Second:	Commissioner Bilodeau
Vote:	Unanimous

2024 - 2025 PROFESSIONAL/CONSULTANT RFPs

3. **Executive Director (7/1/2024-6/30/2027):** Was rebid with responses due on January 9, 2025. There were 2 responders, which were reviewed by the Contracts Committee. They are recommending the retroactive the award go to PERMA LLC. Contracts Committee's evaluation summary can be found in Appendix IV. Resolution 3-25 awards this contract.
4. **Program Manager (7/1/2024-6/30/2027):** Waiting pre advertisement approval from OSC. Conner Strong & Buckelew is continuing to provide these services as an extension of the prior contract.
5. **Nurse Advocacy (7/1/2024-6/30/2025):** As per the decision at the last meeting, this contract was extended for 1 year. **Resolution 4-25** authorizes the Fund's QPA to release a competitive contract RFP for Nurse Advocacy for an extended term (7/1/2025-6/30/2028).

NEW MEMBERS

Union Beach BOE has submitted a request to join the SHIF. The underwriting details are below and have been reviewed and approved by the Fund Actuary, Underwriter and Operations Committee. Resolution 5-25 is included in the consent agenda.

SHIF PROGRAM MANAGER RFP- LEGAL BILLING

The Fund Attorney has worked diligently on the pre-approval filing with the OSC for the Program Manager contract for the past 8 month. The amount of legal work is outside the Fund Attorney scope and would fall under the hourly fee in his contract. An invoice for these additional services is on the January bills list at the hourly fee approved through his RFP response. This cost will come out of contingency, which adequately supports the requested amount.

PHARMACY BENEFIT MANAGER (PBM) RFP

The current Level Care (ESI) Contract is in its final extension through December 31, 2025. In 2021, the statewide Funds collectively issued an RFP through the MRHIF to award this contract. The Health Insurance Pricing System Cooperative has since been set up and approved for PBM procurement on behalf of the local Funds and will begin the initial stages of pre-approval by the OSC. We will continue to update the Co-Op representatives as we move forward and hope to have approval mid-summer for a January 1, 2026 effective date.

COOPERATIVE PRICING SYSTEM TPA RFP - LEGAL BILLING

The Fund Attorney of the SNJHIF, lead agent of the Cooperative Pricing System has submitted bills to the SNJHIF for his contributions and efforts in the Third-Party Administrator RFPs that required Comptroller Review and Approval. The amount of legal work is outside the Fund Attorney scope and would fall under the hourly fee in his contract. The SNJHIF will bill a pro-rated share to the other Fund members. The total invoiced amount was \$1,909 and the SHIF's prorated share is \$909.92, based on % of statewide medical enrollment.

RETAINED DIVIDEND LISTING

A list of the Retained Dividends are included on page 14. These retained dividends are available to the group at any time via check or bill credit. The group must fill out retained dividend request form which is in **Appendix II** and send it to jrobinson@permainc.com

BROKER FEE PAYMENTS

In continuing efforts to maintain transparency, we would like to discuss with the Contracts Committee the process of transferring broker fee collection and payment from the Program Manager's contract to direct by the Fund. The Reorg resolutions include the broker fee resolution and contract as it currently stands which will be in force for the next few months.

Should the Committee deem this new process necessary, we project the following timeline:

- Early March: Committee discussion and Attorney review
- Mid March: Broker communication
- Mid-end March: New contract and requirement documentation completed; update Executive Committee
- End of March: File contracts with State
- April/May bills list: First payment to broker by Fund

Hi FUND MARKETING UPDATE

As Executive Director of the MRHIF, PERMA oversees a marketing platform to help educate, promote, and advance the various health insurance funds. To assist in this, several years back *the* MRHIF awarded a contract to Princeton Public Affairs ("Princeton") to develop in a common marketing brand that could help improve marketplace knowledge and familiarity with HIFs. Princeton also does marketing work for the MEL. They created the hi Fund brand as a creative way to help achieve the goal of further education

and promotion state-wide. The hi Fund branding has been helpful to centrally deliver the value proposition of the HIFs.

More recently, the office of state comptroller had questions about the hi Fund, what it is and its purpose. We have educated them as best as possible. Furthermore, to ensure there is no ambiguity, we have added the text below to every page at the hi Fund web site, so it is clear what the purpose of the brand is. This is as follows:

The term "hi Funds" is a branding name that is used to help promote and educate public entities about Health Insurance Funds ("HIFs) which are permitted pursuant to NJ law under 40A:10-36. PERMA is currently the appointed executive director of HIFs that collectively advertise and educate the marketplace under the banner " The hi Funds". The "hi Funds is not a company or an entity and is used merely to help in the promotion, education, and advancement of HIFs in New Jersey. Each HIF maintains a separate web site as required by statute, all of which are available at this site.

Each Fund's web site is posted on the hi Fund site as well.

We see value in the continuation of the hi Fund branding and wanted you to be fully aware of this. If you have any questions or comments with the use of the hi Fund or would like to discuss, please let us know.

2025 MEL, MR HIF & NJCE JIF Educational Seminar:

The 15th annual seminar will be conducted virtually on 2 half-day sessions: Friday April 25th and Friday May 2nd 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).

Enclosed in **Appendix III** is the latest in a series of Power of Collaboration advertisement to be published in the League of Municipalities magazine which highlights the educational seminar.

VOUCHERS

Starting with the April vouchers, PERMA will be sending both vouchers and backup exclusively through DocuSign to Fund vendors. Please reach out to HIFfinance@permainc.com to confirm the current email address that vouchers are sent to can continue to be used to send via DocuSign.

PROGRAM MANAGER'S REPORT

Miss Bailey reviewed the following Program Manager agenda items:

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**. 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.

Operational Updates:

End of Year/Wellness Incentive Program Reporting

End of Year Reporting was sent to all SHIF group billing contacts the week of December 30th.

Wellness Incentive Program reports reflecting employees who received a gym reimbursement in 2024 were sent to all groups. 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 2024

- Up to \$240 per eligible participant
- Initial report will be for reimbursements issued for the time period of **January 1, 2024 through November 30, 2024**
 - Reports were sent to group billing contacts the week of January 6th
- Reporting for December 2024 was sent in late January
 - 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
 - We recommend groups confirm with their tax advisor if reimbursements for spouses and dependents should be included in the employee's reporting

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

Coverage Updates: None

Express Scripts Updates:

2025 Formulary and SaveOn Listing

Brokers were sent the 2025 Formulary on November 11th. Please note the following:

NPF Listing:

- NPF Exclusions Listing, please note the following:
 - Humalog - excluded for members with a new prescription as of 1/1/25, members currently taking the drug will be excluded effective 1/1/26
 - Members should share the covered preferred alternatives provided in the listing with their providers

- Humira - excluded for members with a new prescription as of 1/1/25, members currently taking the drug will be excluded effective 7/1/25
 - Members should share the covered preferred alternatives provided in the listing with their providers
- Impacted members will be notified by ESI. The notification will include covered preferred alternatives under the NPF

**Encircle Program (GLP-1 Weight Loss)
Effective January 1, 2025:**

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

- Members will receive a welcome kit from Omada free of charge. The kit includes a digital scale and information on downloading the mobile app and/or using the web browser. The scale is programmed to the member's ESI active account prior to delivery. The scale will record each weigh-in and will update the member's file automatically. Members must weigh-in a minimum of 4 times a month
- Members must engage with an assigned online Omada coach via a mobile application or web browser a minimum of 4 times a month

If members do not adhere to both of the requirements outlined above, the following month in which they are non-compliant, they will not be able to refill their weight loss prescription. Members will be required to complete the missing weigh-ins and/or online coaching engagement in order to refill their prescription.

Notice of Creditable Coverage (NOCC)

Effective September 1, 2024:

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

Effective January 1, 2025:

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

- Members will receive a welcome kit from Omada free of charge. The kit includes a digital scale and information on downloading the mobile app and/or using the web browser. The scale is programmed to the member's ESI active account prior to delivery. The scale will record each weigh-in and will update the member's file automatically. Members must weigh-in a minimum of 4 times a month

- Members must engage with an assigned online Omada coach via a mobile application or web browser a minimum of 4 times a month

If members do not adhere to both of the requirements outlined above, the following month in which they are non-compliant, they will not be able to refill their weight loss prescription. Members will be required to complete the missing weigh-ins and/or online coaching engagement in order to refill their prescription.

Based on the above, communications are being updated and will be sent to members once finalized. Sample communications will be sent once finalized.

2025 Legislative Review:

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 attestation is due annually by December 31st. Groups do not need to take any additional action unless they do not have medical or prescription coverage in the Southern New Jersey Regional Health Insurance Fund.

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
11/19/2024	Medical/Aetna	SHIF 2024 11 03	Surgical Services	Overtured	12/3/2024
11/20/2024	Medical/Aetna	SHIF 2024 11 04	Office Visit	Overtured	12/17/2024
11/25/2024	Medical/Aetna	SHIF 2024 11 05	Surgical Services	Upheld	02/20/2025
11/29/2024	Medical/Aetna	SHIF 2024 12 01	Laboratory Services	Overtured	12/10/2024
12/4/2024	Medical/Aetna	SHIF 2024 12 02	Injectable Coverage	Upheld	12/11/2024
12/6/2024	Medical/Aetna	SHIF 2024 12 03	Laboratory Services	Under Review	
12/11/2024	Medical/Aetna	SHIF 2024 12 04	Surgical Services	Overtured	1/2/2025
12/20/2024	Medical/Aetna	SHIF 2024 12 05	Emergency Services	Upheld	12/23/2024
12/26/2024	Medical/Aetna	SHIF 2024 12 06	Laboratory Services	Upheld	02/11/2025
12/30/2024	Medical/Aetna	SHIF 2025 01 01	Laboratory Services	Upheld	02/15/2025
01/06/2025	Medical/Aetna	SHIF 2025 01 03	Nursing Care	Overtured	1/12/2025
01/07/2025	Medical/Aetna	SHIF 2025 01 04	Surgical Services	Upheld	02/10/2025
01/08/2025	Medical/Aetna	SHIF 2025 01 05	Surgical Services	Upheld	02/10/2025
01/23/2025	Medical/Aetna	SHIF 2025 01 06	Surgical Services	Upheld	02/11/2025
01/30/2025	Medical/Aetna	SHIF 2025 01 07	Surgical Services	Under Review	
02/05/2025	Medical/Aetna	SHIF 2025 02 01	CT Scan	Under Review	
02/11/2025	Medical/Aetna	SHIF 2025 02 02	DME Supplies	Under Review	
02/11/2025	Medical/Aetna	SHIF 2025 02 03	Anesthesia	Under Review	
02/14/2025	Medical/Aetna	SHIF 2025 02 04	Formula Coverage	Under Review	

IRO Submissions:

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
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11/19/2024	Medical/Aetna	SHIF 2024 11 03	Surgical Services	Overturned	12/3/2024
11/29/2024	Medical/Aetna	SHIF 2024 12 01	Laboratory Services	Overturned	12/10/2024
12/4/2024	Medical/Aetna	SHIF 2024 12 02	Injectable Coverage	Upheld	12/11/2024
12/11/2024	Medical/Aetna	SHIF 2024 12 04	Surgical Services	Overturned	1/2/2025
12/26/2024	Medical/Aetna	SHIF 2024 12 06	Laboratory Services	Upheld	02/11/2025
12/30/2024	Medical/Aetna	SHIF 2025 01 01	Laboratory Services	Upheld	02/15/2025
01/06/2024	Medical/Aetna	SHIF 2025 01 03	Nursing Care	Overturned	1/12/2025
01/07/2025	Medical/Aetna	SHIF 2025 01 04	Surgical Services	Upheld	02/10/2025
01/08/2024	Medical/Aetna	SHIF 2025 01 05	Surgical Services	Upheld	02/06/2025
01/23/2025	Medical/Aetna	SHIF 2025 01 06	Surgical Services	Upheld	02/11/2025
01/30/2025	Medical/Aetna	SHIF 2025 01 07	Surgical Services	Under Review	
02/05/2025	Medical/Aetna	SHIF 2025 02 01	CT Scan	Under Review	
02/11/2025	Medical/Aetna	SHIF 2025 02 02	DME Supplies	Under Review	

Small Claim Committee Appeals: None

GUARDIAN NURSES (“GN”) - Jen White reviewed the report included in the agenda that reflects the annual members for 2024 as compared to 2023 as well as Q4 reporting.

TREASURER- Fund Treasurer reviewed the December 2024, January and February 2025 bill list. She reviewed the summary of the repots included in the agenda. Fund Treasurer also noted that interest rates seem to be slowly declining.

FUND ATTORNEY - Fund Attorney stated that there have been about 5 GLP 1 program grievances. He stated that they are stating that this is not an equal to or better than issue. Mr. Harris informed them that this is utilization management and this is a cost issue and maintaining the drugs. He stated that there has been no formal arbitration.

In reference to the SHIF Program Manger RFP, he stated that in January he submitted responses to the OSCs questions that were asked. In reference to the TPA RFP, Mr. Harris submitted detailed replies for both AHA and Aetna RFP in mid February and there was no response from the OSC. Mr. Harris stated that at this point there will be an escalation in the level of intensity stating that within 15 business days,

we intend to go out for RFP unless they come back and say we are violating procurement laws. If we don't do a new RFP, we can't get a contract ready for the 2025 calendar year - additional expenses will incur if we do not get to go out for the RFP.

AETNA - Mr. Silverstein reviewed the Aetna report through November and December 2024. He stated that there were 25 high cost claims for the month of November and 18 for December. He commented how the dashboard metrics continue to perform well. Mr. Bilodeau asked about the high cost claim that was over \$700,000. Mr. Silverstein stated that that diagnosis/treatment is expensive and they will keep an eye on it.

AMERIHEALTH - Ms. Strain reviewed the AmeriHealth report through January and noted the high claimants for the month of October. She stated the dashboard metrics continue to perform well.

HORIZON- Michelle Witherspoon touched on the hospital negotiations.

EXPRESS SCRIPTS - Mrs. Patel reviewed Q2 fiscal year reporting. She stated that in the top ten indications, inflammatory conditions are the top driver for utilization. She stated that the top 25 drugs reflect the top ten indication list. She stated that Wegovy and Zepbound are the most expensive and most utilized. She stated that 37% of the Rx that were not able to be filled because the clinical BMI was not met which shows a savings of 1.4million.

Mrs. Patel stated that the new indications are being launched for these drugs. ESI stated that there will be a pill form in the drug coming in 2026 which is cheaper for the injectables.

Mrs. DiGangi left the meeting - 12:53pm.

DELTA - Crista O'Donnell reviewed the network utilization report.

CONSENT AGENDA:

MOTION:	Commissioner Coleman
SECOND:	Commissioner Bilodeau
VOTE:	Unanimous

OLD BUSINESS None.

NEW BUSINESS - None.

PUBLIC COMMENT - None

MOTION TO ADJOURN:

MOTION:	Commissioner Bice
SECOND:	Commissioner Bilodeau
VOTE:	Unanimous

MEETING ADJOURNED: 12:55pm

NEXT MEETING: March 26, 2025

Moorestown Community House

12:00pm

APPENDIX II

**SCHOOLS HEALTH INSURANCE FUND
2025-2026 Proposed Budget**

Census:	Monthly Census	Annual Census
Medical - Aetna	21,092	253,104
Medical - AmeriHealth Admin	5,089	61,068
Medical - Horizon	19	228
Medical - Educator's Plans only (Incl in Med Above)	15,994	191,928
Medical - Garden State Plans only (Incl in Med Above)	521	6,252
Rx	13,406	160,872
Dental	6,707	80,484
Vision	693	8,316
Rx No Medical (Incl in Rx above)	26	312
Dental Only (Incl in Dental above)	727	8,724
DMO Only	6	72

DFS	LINE ITEMS	2024-2025 Annualized Budget	2025-2026 Proposed Budget	\$ Change	% Change
1	Claims				
2	Medical Claims				
3	Medical Claims - Educator's Plans	\$ 323,467,638	\$ 346,334,014	\$ 22,866,376	7.07%
4	Medical Claims - Educator's Plans 1/1/2026 Renewal	\$ 15,756,981	\$ 16,851,881	\$ 1,094,900	6.95%
5	Medical Claims - Garden State Plans	\$ 7,893,781	\$ 8,472,278	\$ 578,497	7.33%
6	Medical Claims - Garden State Plans 1/1/2026 Renewal	\$ 110,880	\$ 118,562	\$ 7,682	6.93%
7	Medical Claims - All Other Plans	\$ 219,804,422	\$ 246,601,539	\$ 26,797,117	12.19%
8	Medical Claims - All Other Plans 1/1/2026 Renewal	\$ 10,648,843	\$ 11,905,670	\$ 1,256,827	11.80%
9	Medical Claims Subtotal	\$ 577,682,545	\$ 630,283,944	\$ 52,601,399	9.11%
10					
11	Prescription Claims				
12	Prescription Claims - EHP/GSP	\$ 36,260,744	\$ 44,135,548	\$ 7,874,804	21.72%
13	Prescription Claims - EHP/GSP 1/1/2026 Renewal	\$ 518,734	\$ 631,160	\$ 112,426	21.67%
14	Prescription Claims - All Other Plans	\$ 23,539,478	\$ 30,269,463	\$ 6,729,985	28.59%
15	Prescription Claims - All Other Plans 1/1/2026 Renewal	\$ 321,651	\$ 412,686	\$ 91,035	28.30%
16	Prescription Claims Subtotal	\$ 60,640,607	\$ 75,448,857	\$ 14,808,250	24.42%
17					
18	Dental Claims	\$ 5,259,792	\$ 5,553,422	\$ 293,630	5.58%
19	Subtotal	\$ 643,582,944	\$ 711,286,223	\$ 67,703,279	10.52%
20					
21	Rate Stabilization Reserve	\$ 1,120,686	\$ 2,000,000	\$ 879,314	78.46%
22					
23	DMO Premiums	\$ 91,716	\$ 96,304	\$ 4,587	5.00%
24					
25	Reinsurance				
26	Specific	\$ 14,210,880	\$ 15,038,115	\$ 827,235	5.82%
27					
28	Total Loss Fund	\$ 659,006,226	\$ 728,420,642	\$ 69,414,415	10.53%
29					
30	Professional and Administrative Expenses				
31	Legal	\$ 39,513	\$ 40,303	\$ 790	2.00%
32	Treasurer	\$ 27,496	\$ 28,046	\$ 550	2.00%
33	Administrator	\$ 2,975,741	\$ 3,033,830	\$ 58,089	1.95%
34	Program Manager	\$ 7,935,947	\$ 8,094,666	\$ 158,719	2.00%
35	Local Entity Risk Management	\$ 9,026,584	\$ 9,218,671	\$ 192,087	2.13%
36	Nurse Advocates	\$ 1,854,960	\$ 1,910,609	\$ 55,649	3.00%
37	TPA - Med Aetna	\$ 8,681,467	\$ 8,681,467	\$ -	0.00%
38	TPA - Med AmeriHealth Admin	\$ 2,219,651	\$ 2,219,651	\$ -	0.00%
39	TPA - Med Horizon	\$ 13,461	\$ 14,135	\$ 673	5.00%
40	TPA - Dental	\$ 268,817	\$ 268,817	\$ -	0.00%
41	TPA - Vision	\$ 7,568	\$ 7,568	\$ -	0.00%
42	Actuary	\$ 37,110	\$ 37,110	\$ -	0.00%
43	Auditor	\$ 21,016	\$ 21,436	\$ 420	2.00%
44	Qualified Purchasing Agent	\$ -	\$ 5,000	\$ 5,000	0.00%
45	Subtotal	\$ 33,109,330	\$ 33,581,307	\$ 471,977	1.43%
46					
47	A4 Retiree Surcharge	11,553,651	12,605,679	1,052,028	9.11%
48					
49	Misc/Contingent Expenses	\$ 56,889	\$ 75,000		
50					
51	Wellness Program	\$ 920,821	\$ 966,862	\$ 46,041	5.00%
52	Affordable Care Act Taxes	\$ 197,928	\$ 197,928	\$ -	0.00%
53	Plan Documents	\$ 30,000	\$ 30,000	\$ -	0.00%
54					
55	Subtotal	\$ 1,205,638	\$ 1,269,790	\$ 64,152	5.32%
56					
57	Total Expenses	\$ 45,868,619	\$ 47,456,776	\$ 1,588,157	3.46%
58					
59	Total Budget	\$ 704,874,845	\$ 775,877,418	\$ 71,002,572	10.07%

Schools Health Insurance Fund	Annualized Assessment FY2024 - 2025	Proposed Assessment FY2025 - 2026	\$ Difference	% Difference
Alexandria Township BOE	\$ 1,623,336	\$ 1,814,544	\$ 191,208	11.78%
Avon Borough BOE	\$ 682,224	\$ 755,640	\$ 73,416	10.76%
Bellmawr Public School District	\$ 3,678,432	\$ 3,992,856	\$ 314,424	8.55%
Berlin Borough BOE	\$ 2,114,220	\$ 2,287,944	\$ 173,724	8.22%
Bethlehem Township School District	\$ 1,547,880	\$ 1,672,452	\$ 124,572	8.05%
Black Horse Pike Regional BOE	\$ 11,843,640	\$ 12,929,712	\$ 1,086,072	9.17%
Blairstown BOE	\$ 1,140,744	\$ 1,239,912	\$ 99,168	8.69%
Bloomsbury BOE	\$ 215,148	\$ 240,192	\$ 25,044	11.64%
Bogota BOE	\$ 4,381,788	\$ 4,925,364	\$ 543,576	12.41%
Burlington Township BOE	\$ 7,991,208	\$ 8,887,212	\$ 896,004	11.21%
Byram Township BOE	\$ 1,976,388	\$ 2,116,728	\$ 140,340	7.10%
Califon BOE	\$ 459,840	\$ 520,884	\$ 61,044	13.28%
Chesterfield BOE	\$ 2,410,020	\$ 2,656,788	\$ 246,768	10.24%
Cinnaminson Township BOE	\$ 9,215,532	\$ 10,426,152	\$ 1,210,620	13.14%
Clark BOE	\$ 6,248,028	\$ 6,891,060	\$ 643,032	10.29%
City of Burlington BOE	\$ 5,874,192	\$ 6,667,656	\$ 793,464	13.51%
Clayton BOE	\$ 3,809,868	\$ 4,041,768	\$ 231,900	6.09%
Clearview Regional BOE	\$ 3,982,140	\$ 4,374,348	\$ 392,208	9.85%
Clinton Township BOE	\$ 4,538,268	\$ 4,914,804	\$ 376,536	8.30%
Collingswood BOE	\$ 6,041,172	\$ 6,463,344	\$ 422,172	6.99%
Delran Township School District	\$ 7,649,880	\$ 8,114,472	\$ 464,592	6.07%
Delsea Regional BOE	\$ 6,194,592	\$ 7,038,228	\$ 843,636	13.62%
Deptford Township BOE	\$ 15,472,740	\$ 17,724,972	\$ 2,252,232	14.56%
East Greenwich BOE	\$ 3,219,516	\$ 3,463,980	\$ 244,464	7.59%

Eastern Camden County School District	\$ 4,933,260	\$ 5,249,628	\$ 316,368	6.41%
Eatontown BOE	\$ 4,426,380	\$ 5,081,316	\$ 654,936	14.80%
ESC of Morris County	\$ 1,294,632	\$ 1,412,832	\$ 118,200	9.13%
Ewing Township BOE	\$ 12,077,592	\$ 13,003,620	\$ 926,028	7.67%
Florence Township BOE	\$ 3,720,816	\$ 4,151,904	\$ 431,088	11.59%
Foundation Academy Charter School	\$ 3,276,972	\$ 3,735,708	\$ 458,736	14.00%
Frankford Township BOE	\$ 1,780,812	\$ 1,952,820	\$ 172,008	9.66%
Franklin Township School District	\$ 1,071,816	\$ 1,185,660	\$ 113,844	10.62%
Fredon Town BOE	\$ 974,796	\$ 1,053,072	\$ 78,276	8.03%
Frelinghuysen Township BOE	\$ 349,644	\$ 384,576	\$ 34,932	9.99%
Gateway Regional BOE	\$ 3,499,752	\$ 3,791,856	\$ 292,104	8.35%
Glassboro BOE	\$ 7,979,928	\$ 8,591,136	\$ 611,208	7.66%
Glen Ridge Public Schools	\$ 179,040	\$ 184,512	\$ 5,472	3.06%
Gloucester City BOE	\$ 7,559,676	\$ 8,217,720	\$ 658,044	8.70%
Gloucester County Special Services School District	\$ 12,226,044	\$ 13,886,580	\$ 1,660,536	13.58%
Gloucester County Vocational School District	\$ 5,361,948	\$ 6,162,108	\$ 800,160	14.92%
Gloucester Township BOE	\$ 23,517,300	\$ 25,639,524	\$ 2,122,224	9.02%
Greenwich Township BOE	\$ 1,976,016	\$ 2,095,476	\$ 119,460	6.05%
Hanover Park BOE	\$ 7,281,948	\$ 7,976,076	\$ 694,128	9.53%
Hardyston Township BOE	\$ 2,017,356	\$ 2,194,284	\$ 176,928	8.77%
Harrison Township BOE	\$ 2,934,912	\$ 3,079,836	\$ 144,924	4.94%
High Point Regional BOE	\$ 2,506,236	\$ 2,718,624	\$ 212,388	8.47%
Hope Township School District	\$ 417,240	\$ 465,720	\$ 48,480	11.62%
Hunterdon Central Regional HS BOE	\$ 12,945,960	\$ 14,134,116	\$ 1,188,156	9.18%
Jamesburg BOE	\$ 2,069,904	\$ 2,350,980	\$ 281,076	13.58%
Kingsway Regional School District	\$ 7,830,960	\$ 8,980,608	\$ 1,149,648	14.68%

Lawrence Township BOE	\$ 13,486,476	\$ 14,701,788	\$ 1,215,312	9.01%
Leap Academy University Charter School	\$ 3,368,448	\$ 3,640,428	\$ 271,980	8.07%
Lebanon Township BOE	\$ 2,218,092	\$ 2,392,596	\$ 174,504	7.87%
Lenape Regional High School	\$ 18,920,292	\$ 20,195,136	\$ 1,274,844	6.74%
Lenape Valley Regional BOE	\$ 3,009,900	\$ 3,357,372	\$ 347,472	11.54%
Lindenwold BOE	\$ 7,737,840	\$ 8,637,636	\$ 899,796	11.63%
Logan Township BOE	\$ 2,251,884	\$ 2,497,956	\$ 246,072	10.93%
Lower Alloways Creek BOE	\$ 503,460	\$ 536,580	\$ 33,120	6.58%
Lumberton Township BOE	\$ 3,494,220	\$ 3,703,632	\$ 209,412	5.99%
Mansfield Township BOE	\$ 1,801,344	\$ 2,011,032	\$ 209,688	11.64%
Mantua Township BOE	\$ 3,598,836	\$ 3,775,656	\$ 176,820	4.91%
Maple Shade BOE	\$ 8,191,176	\$ 9,188,532	\$ 997,356	12.18%
Medford Lakes BOE	\$ 1,281,912	\$ 1,440,072	\$ 158,160	12.34%
Medford Township BOE	\$ 6,907,692	\$ 7,812,876	\$ 905,184	13.10%
Mendham Borough School District	\$ 2,032,344	\$ 2,237,232	\$ 204,888	10.08%
Mendham Township BOE	\$ 3,609,804	\$ 3,927,072	\$ 317,268	8.79%
Metuchen BOE	\$ 6,376,380	\$ 7,063,908	\$ 687,528	10.78%
Middlesex BOE	\$ 4,903,848	\$ 5,330,580	\$ 426,732	8.70%
Montgomery Township BOE	\$ 16,190,220	\$ 17,692,848	\$ 1,502,628	9.28%
Moorestown Township Public Schools	\$ 18,687,480	\$ 21,193,368	\$ 2,505,888	13.41%
Morris Hills BOE	\$ 13,673,844	\$ 15,242,256	\$ 1,568,412	11.47%
Mt Laurel Township	\$ 14,975,268	\$ 17,194,032	\$ 2,218,764	14.82%
MT. Holly Township BOE	\$ 3,214,872	\$ 3,578,868	\$ 363,996	11.32%
Newton BOE	\$ 4,806,564	\$ 5,084,700	\$ 278,136	5.79%
North Hunterdon-Voorhees BOE	\$ 7,420,644	\$ 8,263,848	\$ 843,204	11.36%
Northern Burlington County Regional School Dstrct	\$ 6,428,052	\$ 7,177,416	\$ 749,364	11.66%
Oakland BOE	\$ 4,753,644	\$ 5,361,900	\$ 608,256	12.80%

Ogdensburg Borough School District	\$ 990,948	\$ 1,083,612	\$ 92,664	9.35%
Oxford Central School	\$ 727,764	\$ 777,588	\$ 49,824	6.85%
Paulsboro Public Schools	\$ 4,121,952	\$ 4,379,388	\$ 257,436	6.25%
Pennsauken BOE	\$ 17,014,992	\$ 19,016,520	\$ 2,001,528	11.76%
Pinelands Regional School District	\$ 6,960,000	\$ 7,459,932	\$ 499,932	7.18%
Pohatcong Township BOE	\$ 985,668	\$ 1,056,504	\$ 70,836	7.19%
Ramapo Indian Hills Regional High School	\$ 6,984,552	\$ 7,845,648	\$ 861,096	12.33%
Rancocas Valley Regional BOE	\$ 4,037,052	\$ 4,321,236	\$ 284,184	7.04%
Randolph BOE	\$ 16,626,348	\$ 18,490,260	\$ 1,863,912	11.21%
Readington BOE	\$ 6,605,988	\$ 7,416,960	\$ 810,972	12.28%
Ringwood BOE	\$ 3,979,920	\$ 4,213,812	\$ 233,892	5.88%
Riverside Township BOE	\$ 3,787,560	\$ 4,090,200	\$ 302,640	7.99%
Robbinsville BOE	\$ 6,222,996	\$ 6,962,268	\$ 739,272	11.88%
Roxbury Township BOE	\$ 13,507,728	\$ 15,266,136	\$ 1,758,408	13.02%
Sandyston-Walpack Consolidated School District	\$ 499,956	\$ 549,792	\$ 49,836	9.97%
School District of the Chathams	\$ 13,660,032	\$ 15,456,024	\$ 1,795,992	13.15%
Shamong Township BOE	\$ 1,960,452	\$ 2,134,212	\$ 173,760	8.86%
Somerset Hills BOE	\$ 6,101,424	\$ 6,765,552	\$ 664,128	10.88%
South Harrison BOE	\$ 830,676	\$ 886,380	\$ 55,704	6.71%
Southampton Township BOE	\$ 2,178,324	\$ 2,463,672	\$ 285,348	13.10%
Springfield Township BOE	\$ 755,220	\$ 823,212	\$ 67,992	9.00%
Sterling Regional High School	\$ 2,411,196	\$ 2,600,964	\$ 189,768	7.87%
Stillwater Township BOE	\$ 1,272,528	\$ 1,377,888	\$ 105,360	8.28%
Summit BOE	\$ 11,040,576	\$ 11,625,180	\$ 584,604	5.30%
Swedesboro Woolwich BOE	\$ 5,135,628	\$ 5,712,768	\$ 577,140	11.24%
Tabernacle BOE	\$ 2,559,588	\$ 2,846,388	\$ 286,800	11.20%
Township of Franklin Public Schools (GC)	\$ 5,123,532	\$ 5,540,208	\$ 416,676	8.13%

Upper Pittsgrove BOE	\$ 710,760	\$ 769,200	\$ 58,440	8.22%
Voorhees Township BOE	\$ 12,256,812	\$ 13,736,160	\$ 1,479,348	12.07%
Wallkill Valley Regional BOE	\$ 1,419,156	\$ 1,490,652	\$ 71,496	5.04%
Washington Borough BOE	\$ 1,475,352	\$ 1,655,244	\$ 179,892	12.19%
Washington Township BOE	\$ 20,832,660	\$ 22,735,992	\$ 1,903,332	9.14%
Watchung Borough BOE	\$ 2,799,276	\$ 3,150,636	\$ 351,360	12.55%
Watchung Hills Regional High School	\$ 6,559,044	\$ 7,496,652	\$ 937,608	14.29%
West Deptford BOE	\$ 9,326,988	\$ 10,529,712	\$ 1,202,724	12.90%
West Morris Regional High School	\$ 8,277,600	\$ 9,091,644	\$ 814,044	9.83%
West Orange BOE	\$ 27,667,452	\$ 30,681,756	\$ 3,014,304	10.89%
West Windsor Plainsboro BOE	\$ 26,098,380	\$ 27,289,098	\$ 1,190,718	4.56%
White Township BOE	\$ 1,079,568	\$ 1,132,596	\$ 53,028	4.91%
Woodbury City BOE	\$ 4,699,092	\$ 5,250,492	\$ 551,400	11.73%
Woodbury Heights BOE	\$ 691,680	\$ 765,516	\$ 73,836	10.67%
Woodland Township BOE	\$ 340,476	\$ 362,304	\$ 21,828	6.41%
Woodstown-Pilesgrove BOE	\$ 3,721,044	\$ 4,139,988	\$ 418,944	11.26%

APPENDIX III



15TH ANNUAL MEL, MRHIF & NJCE EDUCATIONAL SEMINAR

SAVE THE DATES

FRIDAY, APRIL 25 ▶ 9:00 AM – NOON

FRIDAY, MAY 2 ▶ 9:00 AM – NOON

Available Online at No Cost to Members

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

The seminar is pending approval 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

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AGENDA



KEYNOTE SPEAKER

Michael Chertoff served as United States Secretary of Homeland Security. His distinguished legal career includes service as a circuit judge of the United States Court of Appeals for the Third Circuit, and as Assistant U.S. Attorney General.

FRIDAY, APRIL 25

- Keynote Address
- Ethics
- Benefits Issues

FRIDAY, MAY 2

- 1st Amendment Claims Against Local Government
- 1st Amendment Audits
- Emerging Claims Issues

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