# NORTH JERSEY MUNICIPAL EMPLOYEE BENEFITS FUND



# SEPTEMBER 26, 2024 RANDOLPH TOWNSHIP HALL 9:30 AM AGENDA AND REPORTS

Meeting Location: Township of Randolph Municipal Building

502 Millbrook Ave. Randolph, NJ 07869 Tel: 973.989.7100 Fax: 973.989.7096

# STATEMENT OF COMPLIANCE WITH OPEN PUBLIC MEETINGS ACT

NOTICE OF THIS MEETING WAS GIVEN BY (1) SENDING SUFFICIENT NOTICE HEREWITH TO THE STAR LEDGER, THE RECORD, (2) FILING ADVANCE WRITTEN NOTICE OF THIS MEETING WITH THE CLERK/ADMINISTRATOR OF EACH MEMBER MUNICIPALITY AND SCHOOL BOARDS (3) POSTING A COPY OF THE MEETING NOTICE ON THE PUBLIC BULLETIN BOARD OF ALL MEMBER MUNICIPALITIES AND SCHOOL BOARDS.

#### NORTH JERSEY MUNICIPAL EMPLOYEE BENEFITS FUND AGENDA MEETING: SEPTEMBER 26, 2024 RANDOLPH TOWNSHIP HALL 9:30 AM

# MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

### FLAG SALUTE

# **ROLL CALL OF 2024 EXECUTIVE COMMITTEE**

2024 Executive Committee						
Scott Heck, Chair	Borough of Ringwood					
Tom Russo, Secretary	Town of Newton					
Barbara Russo	Township of Berkeley Heights					
Tammy Smith	Knowlton BOE					
Silvio Esposito	Township of Hanover					
Carinne Piccolo- Kaufer	Township of Hardyston					
Greg Poff	Borough of Randolph*					
Executive Comm	ittee Alternates:					
Adam Brewer	Township of Pequannock					
OPEN						
Dina Valente - Stoel	Borough of Lincoln Park					

### APPROVAL OF MINUTES: July 25, 2024

Open Appendix I

#### **CORRESPONDENCE –** None

### **MONTHLY COMMITTEE REPORTS:**

CLAIMS COMMITTEE - Perry Mayers

**CONTRACTS COMMITTEE –** Tammy Smith, Chair

FINANCE COMMITTEE - Tom Russo, Chair	
Meeting Minutes: September 17Appendix II	

<b>OPERATIONS COMMITTEE –</b> Adam Brewer, Chair	
Meeting Minutes: September 11 Appendix III	

WELLNESS COMMITTEE – Carrine Kaufer, Chair
Meeting Minutes: September 4 Appendix IV

## **PROFESSIONALS REPORTS:**

EXECUTIVE DIRECTOR (PERMA)
Monthly ReportPage
Resolution 24-29: 2025 Budget IntroductionPage 1
PROGRAM MANAGER- (Vozza Agency)
Monthly ReportPage 1
TREASURER – (Michael Soccio)
August and September 2024 Voucher ListPage 2 Confirmation of Claims Paid/Certification of Transfers Ratification of Treasurers Report
Resolution 24-30: August and September 2024 Bills ListPage 3
ATTORNEY – (Edward Pasternak, Esq)
Monthly ReportPage 3
NETWORK & THIRD-PARTY ADMINISTRATOR – (Aetna – Jason Silverstein) Monthly ReportPage 3
PRESCRIPTION ADMINISTRATOR - (Express Scripts-Charles Yuk) Monthly ReportPage 3
DENTAL ADMINISTRATOR - (Delta Dental) Monthly ReportPage 4
OLD BUSINESS
NEW BUSINESS
PUBLIC COMMENT

MEETING ADJOURNED

## NORTH JERSEY MUNICIPAL EMPLOYEE BENEFITS FUND EXECUTIVE DIRECTOR'S REPORT SEPTEMBER 26, 2024

## **FINANCE**

## PRO FORMA REPORTS

## **Fast Track Financial Report** – as of June 30, 2024 (page 6)

## 2025 NJHIF BUDGET - INTRODUCTION

The 2025 proposed budget and proposed assessments are on located on page 10 of this agenda. A 2025 budget presentation is included as an attachment to the agenda which will be reviewed at the meeting.

The Finance Committee also reviewed the presentation and are recommending introduction, as presented. If deemed appropriate, the Committee can introduce the budget and adopt on October 24, 2024, allowing for Open Enrollment to occur thereafter. Rate reports will be available by the end of September.

Resolution: 24-29 is in the Consent Agenda or can be moved separately.

**Motion:** *Motion to introduce the 2025 North Jersey Health Insurance Fund Budget in the amount of* **\$74,858,055** *and to advertise a public hearing of the budget adoption on October 24, 2024.* 

### DIVIDEND

At this time, the Finance Committee will not be recommending a Fund dividend. The Committee will reevaluate at any time.

# 2025 PROFESSIONAL/CONSULTANT RFPS

The Fund QPA contract is currently at MRHIF level. For the issuance of the Medicare Advantage, Program Manager and Actuary RFPs, the contract should be direct between the QPA and the Fund. We would expect this cost for each year to below the threshold and can be procured through a bid process.

Also, at the recommendation of the MRHIF QPA and Fund Attorney, it is best practice that moving forward the Program Manager and Executive Director RFPs be opened and reviewed with the Contracts Committee by the Fund Attorney.

**Motion:** Motion to allow the Contracts Committee to allow the Executive Director seek proposals for Qualified Purchasing Agent for the North Jersey Municipal Employee Benefits Fund for the remainder of 2024.

# MEDICARE ADVANTAGE - RFP

The Committee approved the release of this RFP through the Cooperative earlier this year. We are recommending that each Fund RFP individually instead.

We expect to have it out very shortly with results prior to budget adoption.

# INDEMNITY AND TRUST AGREEMENTS

PERMA sent Indemnity and Trust Agreements and Resolutions to be adopted by the governing bodies to renew membership with the Fund for an additional 3 years. Below is a list of members who have renewing agreements have expired. Please reach out to <u>hifadmin@permainc.com</u> for a blank form to be executed. The list was last updated on September 13, 2024.

MEMBER	I&T END DATE
TOWNSHIP OF BYRAM	12/31/2023

		FINANCIAL F	AST TRACK REPORT		
		AS OF	June 30, 2024		
		THIS	YTD	PRIOR	FUND
		MONTH	CHANGE	YEAR END	BALANCE
UNDERWRITING INC	OME	5,449,932	31,730,435	839,803,082	871,533,53
CLAIM EXPENSES					
Paid Claims		4,600,965	28,199,068	698,809,897	727,008,9
IBNR		78,698	1,969,902	3,677,424	5,647,3
Less Specific Exces		(19,066)	(21,148)	(21,558,076)	(21,579,2
Less Aggregate Ex	cess	-	-	-	
TOTAL CLAIMS		4,660,597	30,147,823	680,929,245	711,077,0
EXPENSES					
MA & HMO Premit	ıms	311,649	1,811,122	26,121,322	27,932,4
Excess Premiums		364,595	2,137,319	35,004,790	37,142,:
Administrative		286,424	1,526,673	55,763,762	57,290,4
TOTAL EXPENSES		962,667	5,475,115	116,889,874	122,364,9
UNDERWRITING PROFIT	/(LOSS) (1-2-3)	(173,333)	(3,892,502)	41,983,963	38,091,4
INVESTMENT INCOME		46,553	285,755	5,500,768	5,786,
DIVIDEND INCOME		-	-	6,212,250	6,212,
STATUTORY PROFIT/(LO	SS) (4+5+6)	(126,779)	(3,606,747)	53,696,981	50,090,2
DIVIDEND		-	<u> </u>	42,501,592	42,501,
				,	,,
Transferred Surplus IN		-	-		
Transferred Surplus OUT		-	-	-	
STATUTORY SURPLU	S (7-8+9)	(126,779)	(3,606,747)	11,195,389	7,588,6
		SURPLUS (DEFICI	TS) BY FUND YEAR		
Closed	Surplus	19,069	73,345	11,447,431	11,520,
closed	Cash	(20,122)	(188,816)	14,148,822	13,960,0
2023	Surplus	7,945	(1,507,275)	(252,043)	(1,759,
	Cash	(74,291)	(2,429,729)	870,567	(1,559,
2024	Surplus	(153,794)	(2,172,817)		(2,172,
	Cash	1,245,756	763,111		763,
TAL SURPLUS (DEFICI	TS)	(126,779)	(3,606,747)	11,195,388	7,588,6
TAL CASH		1,151,344	(1,855,434)	15,019,389	13,163,9
		11	S BY FUND YEAR		-,,-
				COO 000 074	
		20,569	174,514	638,800,951	638,975,
TOTAL CLOSED YEAR CLA					
FUND YEAR 2023				38,450,871	43,601,
FUND YEAR 2023 Paid Claims		57,167	5,150,627		211,
FUND YEAR 2023 Paid Claims IBNR		57,167 (64,356)	(3,465,972)	3,677,424	
FUND YEAR 2023 Paid Claims IBNR Less Specific Exces				3,677,424	
FUND YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Ex		(64,356) - -	(3,465,972) - -	-	
FUND YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Ex TOTAL FY 2023 CLAIMS				3,677,424 - - 42,128,295	43,812,
FUND YEAR 2023         Paid Claims         IBNR         Less Specific Excess         Less Aggregate Ex         TOTAL FY 2023 CLAIMS         FUND YEAR 2024		(64,356) - - (7,189)	(3,465,972) - - <b>1,684,655</b>	-	43,812,
FUND YEAR 2023         Paid Claims         IBNR         Less Specific Excess         Less Aggregate Ex         TOTAL FY 2023 CLAIMS         FUND YEAR 2024         Paid Claims		(64,356) - - (7,189) 4,523,229	(3,465,972) - - <b>1,684,655</b> 22,871,845	-	22,871,
FUND VEAR 2023         Paid Claims         IBNR         Less Specific Excess         Less Aggregate Ex         TOTAL FY 2023 CLAIMS         FUND VEAR 2024         Paid Claims         IBNR		(64,356) 	(3,465,972) - - 1,684,655 22,871,845 5,435,874	-	22,871, 5,435,
FUND VEAR 2023         Paid Claims         IBNR         Less Specific Excess         Less Aggregate Ex         TOTAL FY 2023 CLAIMS         FUND VEAR 2024         Paid Claims         IBNR         Less Specific Excess         Less Specific Excess	Cess	(64,356) - - (7,189) 4,523,229	(3,465,972) - - <b>1,684,655</b> 22,871,845	-	22,871, 5,435,
FUND YEAR 2023         Paid Claims         IBNR         Less Specific Excess         Less Aggregate Ex         TOTAL FY 2023 CLAIMS         FUND YEAR 2024         Paid Claims         IBNR         Less Specific Excess         Less Specific Excess         Less Specific Excess         Less Aggregate Ex	Cess	(64,356) 	(3,465,972) 	-	22,871, 5,435, (19,
FUND YEAR 2023       Paid Claims       IBNR       Less Specific Excess       Less Aggregate Ex       TOTAL FY 2023 CLAIMS       FUND YEAR 2024       Paid Claims       IBNR       Less Specific Excess       Less Specific Excess	cess	(64,356) 	(3,465,972) - - 1,684,655 22,871,845 5,435,874	-	

RATIOS										
					FY202	.4				
INDICES	2023	JAN	FEB	MAR		APR		MAY		JUN
Cash Position	15,019,389	\$ 12,677,102	\$ 14,154,852	\$	14,569,752	\$	13,620,035	\$ 12,012,611	\$	13,163,955
IBNR	3,677,424	\$ 4,007,308	\$ 4,607,101	\$	5,170,005	\$	5,427,111	\$ 5,568,628	\$	5,647,326
Assets	17,877,237	\$ 17,175,672	\$ 16,710,912	\$	17,759,260	\$	17,093,183	\$ 15,958,358	\$	15,905,030
Liabilities	6,681,850	\$ 6,833,350	\$ 7,445,834	\$	8,014,669	\$	8,284,814	\$ 8,242,938	\$	8,316,390
Surplus	11,195,387	\$ 10,342,322	\$ 9,265,078	\$	9,744,591	\$	8,808,368	\$ 7,715,420	\$	7,588,640
Claims Paid Month	4,341,792	\$ 4,646,910	\$ 4,560,002	\$	3,620,349	\$	5,225,177	\$ 5,545,666	\$	4,600,965
Claims Budget Month	3,818,377	\$ 4,048,231	\$ 4,038,368	\$	4,486,176	\$	4,505,632	\$ 4,503,243	\$	4,490,343
Claims Paid YTD	42,208,409	\$ 4,646,910	\$ 9,206,912	\$	12,827,260	\$	18,052,438	\$ 23,598,103	\$	28,199,068
Claims Budget YTD	41,738,979	\$ 4,048,231	\$ 8,086,599	\$	12,572,775	\$	17,078,407	\$ 21,581,650	\$	26,061,828
RATIOS										
Cash Position to Claims Paid	3.46	2.73	 3.10		4.02		2.61	2.17		2.86
Claims Paid to Claims Budget Month	1.14	1.15	 1.13		0.81		1.16	1.23		1.02
Claims Paid to Claims Budget YTD	1.01	1.15	1.14		1.0		1.1	1.1		1.1
Cash Position to IBNR	4.08	3.16	3.07		2.82		2.51	2.16		2.33
Assets to Liabilities	2.68	2.51	2.24		2.22		2.06	1.94		1.91
Surplus as Months of Claims	2.93	2.55	2.29		2.17		1.95	1.71		1.69
IBNR to Claims Budget Month	0.96	0.99	 1.14		1.15		1.2	1.24		1.26

## North Jersey Municipal Employee Benefits Fund CONSOLIDATED BALANCE SHEET AS OF JUNE 30, 2024

#### BY FUND YEAR

,	NJMEB 2024	NJMEB 2023	NJMEB 2022	CLOSED YEAR	FUND BALANCE
ASSETS					
Cash & Cash Equivalents	763,111	(1,559,162)	0	13,960,005	13,163,955
Assesstments Receivable (Prepaid)	1,432,172	(1,881)	-	(3,147)	1,427,144
Interest Receivable	5,752	4,198	-	67,328	77,279
Specific Excess Receivable	19,066	-	-	-	19,066
Aggregate Excess Receivable	-	-	-	-	-
Dividend Receivable	-	-	-	-	-
Prepaid Admin Fees	-	-	-	-	-
Other Assets	1,197,087	20,500	-	-	1,217,587
Total Assets	3,417,188	(1,536,345)	0	14,024,186	15,905,030
LIABILITIES Accounts Payable IBNR Reserve A4 Retiree Surcharge Dividends Payable	- 5,435,874 - -	(0) 211,452 10,094 -	- - -	- - - 124,998	(0) 5,647,326 10,094 124,998
Retained Dividends	-	-	-	2,378,413	2,378,413
Acrued/Other Liabilities	154,131	1,428	-	-	155,559
Total Liabilities	5,590,005	222,974	-	2,503,411	8,316,390
EQUITY					
Surplus / (Defiat)	(2,172,817)	(1,759,318)	0	11,520,776	7,588,640
Total Equity	(2,172,817)	(1,759,318)	0	11,520,776	7,588,640
Total Liabilities & Equity	3,417,188	(1,536,345)	0	14,024,186	15,905,030
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.

	North Jersey	Municipal Em	oloyee Benefits	Fund		
		2024 Budget I	•			
		AS OF JUNE 30	-			
		AS OF JULE S	, 2024			
				Cumulative	\$ Variance	% Varaiance
	Cumulative	Annual	Latest Filed	Expensed	\$ variance	
LINE ITEMS	Cumulative	Aliliual	Latest Flieu	Expenseu		
Medical Claims Aetna	23,410,549	47,528,641	39,546,391			
Medical Claims Aetna BOEs	23,410,54	549,660	595,717			
Subtotal Medical Claims	23,692,177	48,078,301	40,142,108	25,592,914	(1,900,737)	-8%
Prescription Claims	1,530,125	3,098,440	2,558,040	25,572,714	(1,500,757)	-070
Subtotal Rx Claims	1,530,125	3,098,440	2,558,040	1,866,766	(336,641)	-22%
Dental Claims	839,526	1,679,398	1,630,553	828,973	10,553	1%
Denui Cunits	057,520	1,077,570	1,000,000	020,975	10,000	1/0
Subtotal	26,061,828	52,856,139	44,330,701	28,288,653	(2,226,825)	-9%
Subtour	20,001,020	<i>c</i> <b>1</b> ,0 <i>c</i> 0,1 <i>c</i> )	1,000,701	20,200,000	(_,,)	570
Medicare Advantage - United	286,761	566,557	596,569	Included in Medic	are Advantage	-Aetna below
Medicare Advantage - Aetna	1,523,623	3,133,280	2,389,779	1,811,122	(738)	
inculate reasoninge richau	1,020,020	0,100,200	<b>_</b> ,009,119	1,011,122	(100)	0,0
Reinsurance						
Specific	2,136,842	4,311,772	3,975,900	2,137,319	(477)	0%
~		.,,.	-,,,		()	
Wellness	141,500	283,000	283,000	141,498	2	0%
		,	,	, , , , ,		
Total Loss Fund	30,150,554	61,150,748	51,575,949	32,378,593	(2,228,039)	-7%
		- , , -	- , ,			
Expenses						
Legal	10,250	20,500	20,500	21,038	(10,788)	-105%
Treasurer	11,717	23,433	23,433	11,718	(1)	
Administrator	260,075	527,620	459,793	260,183	(108)	0%
Program Manager -	346,881	704,576	605,584	327,460	19,420	6%
Program Manager - Brokerage	354,651	709,169	717,435	380,237	(25,586)	-7%
TPA - Aetna	478,632	972,763	818,952	478,829	(198)	0%
Wellness Coordinator	12,500	25,000	25,000	8,333	4,167	33%
Dental TPA	39,075	78,076	78,597	39,095	(20)	0%
Actuary	6,367	12,735	12,734	6,370	(3)	
Auditor	8,906	17,811	17,811	8,904	2	0%
Subtotal Expenses	1,529,052	3,091,683	2,779,840	1,542,167	(13,115)	-1%
Miscelleneous and Special Services						
Misc/Cont(incl. A4 surcharge)	21,250	42,500	42,500	4,303	16,947	80%
Claims and Service Audits	20,000	40,000	40,000	0		0%
Affordable Care Act Taxes	6,924	14,072	11,847	5,729	1,195	17%
Subtotal Misc/Sp Svcs	48,174	96,572	94,347	10,032	18,142	38%
Total Expenses	1,577,226	3,188,255	2,874,188	1,552,199	5,026.75	0%
Total Budget	31,727,781	64,339,003	54,450,137	33,930,792	(2,223,012)	-7%

2         Morical Claims Ann BORs         5         53009         5         71600         71702         14.4           3         Subtani Mechal Claims         \$         48734,773         \$         55738,245         7,003,472         14.3'           4         Prescription Claims         \$         4.40(388         \$         6.547,792         11684,444         36'           5         Prescription Claims         \$         0.175,523         \$         2.011,333         (530,009)         36'           6         Dental Chaims         \$         1.075,853         \$         0.175,667         7,815.6         4.4           7	Nortl	h Jersey Municipal Employee Benefits	Fund			
Metical Anna         2.081         2.097         11.041           Bs         0.772         0.1045           Brail Andonage-Malical         0.798         0.10356           Bread Outly (fact in Relation)         0.784         885           Bread Outly (fact in Relation)         0.875         810           Medicar Advanage Outly         887         10064           LINEITENS         2024 Annualized Bodget         5.10454         6.025570           Medicar Advanage Outly         887         5.10454         6.025570           Stotead Medicar Actum         5         6.8198771         5         5.104581         6.025570           Stotead Medicar Chains Actum         5         6.8198771         5         5.70282         7.004077         14.3           Stotead Medicar Chains Actum         5         4.010388         5         6.025370         14.3           Stotead Medicar Chains Actum         5         4.010388         5         7.004077         14.3           Stotead Medicar Chains Actum         5         4.075520         5         6.021750         16.4           Procciption Chains         5         4.075520         5         6.021750         16.4           Stotead Medicar Chains Actum	2025	Certified Budget				
Bs         Interface         Interface         Interface           Bernal         1.1945         3.1930           Methoducal Charange-Method         3.098         1.1930           Bernal Coluy (Incl in Extual above)         3.001         8.112           Methoducal Charange Conversion         3.001         8.112           Methoducal Charange Conversion         3.001         8.112           Image Conversion         3.0024 Annualized Budget         2025 Proposel Budget         5.Change         *.Change           1         Medical Charan Acena OB         5.03434,4773         5.03434,572         4.0323           3         Medical Charan Acena OB         5.0404,74738         5.0227,72         1.433           4         Prescription Rehates         5.047,7520         5         2.032,700         3.03000           5         Description Rehates         5.016,783,761         5         8.22099         1.033           10         Medicar Charange Conversion         5         3.739,878         5         3.990,70         3.0300           11         Medicar Advantage United         5         3.990,70         5         8.22099         1.012,71           12         Subtical Methoducar Charand accoversion Rehates         5         3.990		Census:				
Imal         1.945         2.233           Molicar Advantage - Maria         988         11.226           Robo Mackal (Inci in Reabove)		Medical Aetna	2,08	1 24,9	72	
Index         Method         Method </td <td></td> <td>Rx</td> <td>97</td> <td>2 11,6</td> <td>54</td> <td></td>		Rx	97	2 11,6	54	
By Machinal (Inclin Basobow)         9		Dental	1,94	5 23,3	40	
Denail Only (Inclin Denulabove)         960         81.02           Medicar Advantage Only         807         106.04           Medicar Advantage Only         2024 Annualized Budget         2025 Proposed Budget         5 Change         % Change           Medicar Chirm Aema 005         8<         48,097.14         5         55,124.34         6.03.061         77.02         14.4           Medicar Chirm Aema 005         8         48,097.14         5         55,758.34         7.00.0472         14.44           Medicar Chirm Aema 005         8         48,754.772         8         55,758.345         7.00.0472         14.44           Prescription Rehatos         5         (1,475.320)         5         (2,014.333)         (59.090)         38.0           Description Rehatos         5         (1,475.320)         5         (2,014.333)         (59.090)         38.0           Description Rehatos         5         (1,475.320)         5         (2,014.333)         (59.090)         38.0           Description Rehatos         5         (1,475.320)         5         (2,014.333)         (59.090)         38.0           Modicar Advantage - Mained         5         5.354.843         6         (1,775.376)         8         2.25.00         2.22.1 </td <td></td> <td>Medicare Advantage - Medical</td> <td>93</td> <td>8 11,2</td> <td>56</td> <td></td>		Medicare Advantage - Medical	93	8 11,2	56	
Maikare Advantage Only         1004         1004         1004           INE TITNE         2024 Annualized Budget         2025 Proposed Budget         \$ Change         % Change           1         Medical Chirrs Actan         \$ 48(98714         \$ 51324584         6.053830         141           2         Medical Chirrs Actan         \$ 48(98714         \$ 51324584         6.053830         7.005.472         144           3         Subtoal Medical Chirrs         \$ 48(734773         \$ 6.75378245         7.005.472         144           4         Prescription Rehates         \$ 1.073540         \$ 1.075672         7.005.472         143           5         Description Rehates         \$ 1.073540         \$ 1.075672         7.005.472         143           6         Detrid Chirrs         \$ 1.075540         \$ 8.250.093         143         143           7         Inclaims         \$ 1.075540         \$ 8.250.093         143         144           8         Sincial Medicar Advantage-Stata         \$ 3.221.293         \$ 3.00011         12.0520         12.0520         12.0520         12.0520         12.0520         12.0520         12.0520         12.0520         12.0520         12.0520         12.0520         12.0520         12.0520         12.0520		Rx No Medical (Incl in Rx above)	7	4 8	38	
Medicare Advantage Only         2024 Annalized Biodget         2025 Proposed Biodget         s Change         % Change           I         Medical Chine Aetan         \$ 0294 Annalized Biodget         \$ 013061         7.002         1.41           1         Medical Chine Aetan         \$ 04587071         \$ 013061         7.002         1.44           2         Medical Chine Aetan         \$ 04574773         \$ 053783.45         7.005472         1.43           3         Subtodal Medical Chine         \$ 4,010338         \$ 0.2014323         (539080)         3636           5         Perscription Rebutes         \$ 0.1475330         \$ 0.2014323         (738164)         3636           6         Datati Chines         \$ 0.1475330         \$ 0.2014323         (738164)         3636           6         Datati Chines         \$ 0.1475330         \$ 0.2014323         (738164)         3636           7         Image Chines         \$ 0.1475376         \$ 0.2014323         (738167)         3636           8         Subtodal Advantage Antan         \$ 3.221281         \$ 3.302187         \$ 0.4017         222           10         Medicare Advantage Antan         \$ 3.221281         \$ 3.302187         \$ 0.4017         223         1.016           11		Dental Only (Incl in Dental above)	67	6 8.1	12	
I         Medical Chims Actan         S         44,98,714         S         51,34,584         6,025,370         11,44           2         Medical Chims Actan         S         35,009         S         6,013,660         77,602         14,4           2         Subtoal Medical Chims         S         44,714,773         S         55,738,245         7,004,772         14,3           4         Pescription Chims         S         4,610,388         S         6,529,772         1,684,404         36,5           5         Denal Chims         S         1,078,546         S         1,756,672         78,126         44           7         -						
I         Medical Chims Astria         \$         44,198,714         \$         55,124,584         6,025,570         14.4           2         Medical Chims Astria         \$         535,000         \$         6,013,000         77,602         14.4           2         Subtoal Medical Chims         \$         447,013,038         \$         6,029,720         1,084,404         36.5           4         Prescription Chains         \$         1,018,546         \$         1,755,672         78,126         44.4           7         -			2024 Annualized Budget	2025 Proposed Budget	¢ Change	9/ Change
2         Modical Claims Acts BDEs         \$         530009         \$         14.0           3         Subtaid Medical Claims         \$         487,4773         \$         55738,245         7,003,472         14.3'           4         Prescription Claims         \$         440,0038         \$         6,247,72         16,84,404         36:           5         Prescription Claims         \$         (1,75,32)         \$         (2,044,33)         (559,009)         36:           6         Dental Claims         \$         1,756,075         \$         8,226,93         15:           9			-		5	0
3         Subtod Nofical Claims         5         48,724,773         5         55,738,245         7µ09,3472         114.33           4         Pescription Rebutes         5         4,010,383         5         6,249,722         1,844,404         36.6           5         Pescription Rebutes         5         (1,67,523)         5         (2,014,33)         (3,0009)         36.6           6         Dental Claims         S         1,075,530         5         (2,014,33)         (3,0009)         36.6           7						14.37%
4         Prescription Rebutes         \$         4.610338         \$         6.294,792         1.684.404         36.6           5         Prescription Rebutes         \$         (.1475,324)         \$         (.2014,333)         (.530,000)         36.6           7						14.48%
5         Prescription Rebates         5         (1,475,32)         5         (2,014,33)         (539,000)         (36,54)           6         Dental Claims         S         1,678,540         S         (2,014,33)         (539,000)         (36,54)           8         Subtoral         S         5,558,583         S         (1,755,76)         S         S,220,593         (1,57,57)         S         S,246,454         S         S,220,593         (1,57,57)         S         S,447,203         S         4,470,593         S         4,470,593         S         4,470,593         S         4,470,593         S         4,570,593         S         4,513           10         Medicare Advantage ECWP         \$         3,232,393         \$         1,472,433         \$         2,474,53         \$         4,472,03         \$         2				, ,		14.37%
6       Dental Chims       S       1.078.546       S       1.756.672       7.8,126       4.4         7       -		•				36.53%
7 $    -$ 8       Subtada       \$       \$5,548,388       \$       61,775,376       \$       8,226,093 $-$ 10       Medicare Advantage - United       \$       \$5,9599       \$       666,131       \$       10.600       22.33         11       Medicare Advantage ECWP       \$       3,221,228       \$       3,990,711       \$       769,423       23.33         12       Subtada Medicare Advantage ECWP       \$       3,780,877       \$       4,467,6441       \$       895,663       23.23,73         13       Reinsurance       -					, , , ,	36.53%
8         Subtal         \$         53,548,383         \$         61,775,376         \$         8,226,993         155           9		Dental Claims	\$ 1,678,54	6 \$ 1,756,6	72 78,126	4.65%
9						
10       Medicare Advantage - Unied       \$       599,591       \$       686,131       \$       126,540       22.0         11       Medicare Advantage Corea       \$       3,221,288       \$       3,990,711       \$       709,473       23.3         12       Subtoal Medicare Advantage EXWP       \$       3,780,878       \$       4,676,841       \$       895,963       23.7         13       Reinsurance       -	8	Subtotal	\$ 53,548,38	3 \$ 61,775,3'	<b>'6</b> \$ 8,226,993	15.36%
11       Medicare Advantage Advantage EGWP       \$       3.221.288       \$       3.990,711       \$       709,423       23.3         12       Subtofal Medicare Advantage EGWP       \$       3.780,878       \$       4.676,641       \$       885,963       23.77         13       Reinsumce           \$       895,963       23.77         13       Reinsumce       \$       4.347,296       \$       4.476,441       \$       895,963       23.70         13       Reinsumce       \$       4.347,296       \$       4.782,025       \$       4.347,30       100         15	9					
12         Subtotal Medicare Advanatage EGWP         \$ 3,780,878         \$ 4,676,841         \$ 895,963         23,77           13         Reinsurance	10	Medicare Advantage - United	\$ 559,59	1 \$ 686,1	31 \$ 126,540	22.61%
13       Reinsurance       Image: Constraint of the section of the sectin of the section of the section of the section of the section of	11	Medicare Advantage - Aetna	\$ 3,221,28	8 \$ 3,990,7	11 \$ 769,423	23.89%
14       Specific       S       4,347,296       S       4,782,025       S       434,730       10.0         15	12	Subtotal Medicare Advanatage EGWP	\$ 3,780,87	3 \$ 4,676,84	1 \$ 895,963	23.70%
15       Image: Mark Sector of the sector of t	13	Reinsurance				
16       Wellness       \$       283000       \$       20000       \$       (63,000)      22.         17       Image: Constraint of the second o	14	Specific	\$ 4,347,29	6 \$ 4,782,0	25 \$ 434,730	10.00%
17       Image: Constraint of the second secon	15	· ·				
17       Image: Constraint of the second secon		Wellness	\$ 283.00	0 \$ 220.0	0 \$ (63.000)	-22.26%
18       Image: constraint of the second secon					+ (00,000)	
19       Total Loss Fund       \$       61,959,557       \$       71,454,243       9,494,686       15.         20						
20		Total Loss Fund	\$ 61 959 55	7 \$ 71 454 24	9 494 686	15.32%
21       Control       Control       Control       Control         22       Expenses       Control       Solution       Solution       Solution         23       Legal       Solution       Solution       Solution       Solution       Solution         24       Treasurer       Solution       <		Total Loss Fund	¢ 01,757,55	φ /1, <del>4</del> 3 <b>4</b> ,2	5 9,494,000	15.5270
22       Expenses       Image: Constraint of the symmetry of						
23       Legal       \$       20,000       \$       20,000       \$       400       1.9         24       Treasurer       \$       23,433       \$       22,974       \$       4059       -1.9         25       Administrator       \$       534,946       \$       545,654       \$       10,708       2.2         26       Program Manager       \$       715,149       \$       729,452       \$       14,303       2.0         27       Brokerage       \$       706,329       \$       720,446       \$       14,117       2.0         28       TPA - Aetna       \$       987,393       \$       1,036,763       \$       49,370       5.5         29       Welness Coordinator       \$       25,000       \$       -       \$       (25,000)       -1000         30       Dental TPA       \$       77,956       \$       -       0.0       -1.2       -1.2       -       0.0       -1.2       0.0       -1.0       -1.4       -1.4       -1.4       -1.4       -1.4       -1.4       -1.4       -1.4       -1.4       -1.4       -1.4       -1.4       -1.4       -1.4       -1.4       -1.4       -1.4		F				
24       Treasurer       \$       23,433       \$       22,974       \$       (459)       -1.9         25       Administrator       \$       534,946       \$       545,654       \$       10,708       2.0         26       Program Manager       \$       715,149       \$       729,452       \$       14,303       2.0         27       Brokerage       \$       706,329       \$       720,446       \$       14,117       2.0         28       TPA - Aetna       \$       987,393       \$       1,036,763       \$       49,370       5.5         29       Wellness Coordinator       \$       27,7956       \$       -       \$       (25,000)       -       0.0         30       Dental TPA       \$       77,956       \$       -       0.0       3       3       24,000       \$       3,811       -21.0       0.0       3       3       25       2.0       0.0       1.00       3       3,121,251       \$       3,181,133       \$       59,882       1.1.5       1.00       3       3,121,251       \$       3,181,133       \$       59,882       1.1.5       3,131       -21.4       3       3,121,251       \$		•			20 ¢ 100	1.050
25       Administrator       \$       534,946       \$       545,654       \$       10,708       2.0         26       Program Manager       \$       715,149       \$       729,452       \$       14,303       2.0         27       Brokerage       \$       706,329       \$       720,446       \$       14,117       2.0         28       TPA - Actna       \$       987,393       \$       1,036,763       \$       49,370       5.5         29       Wellness Coordinator       \$       25000       \$       -       \$       (25000)       -100.0         30       Dental TPA       \$       77,956       \$       -       \$       0.0       0.0         31       Actuary       \$       17,811       \$       12,989       \$       3.5       0.0         32       Auditor       \$       17,811       \$       14,000       \$       (3,811)       -1.4         33       Subtotal Expenses       \$       3,121,251       \$       3,181,133       \$       59,882       1.1.5         34       Conctinicl. A4 surcharge)       \$       42,500       \$       42,500       \$       -4       0.0 <tr< td=""><td></td><td>· ·</td><td></td><td></td><td></td><td>1.95%</td></tr<>		· ·				1.95%
26       Program Manager       \$       715,149       \$       729,452       \$       14,303       2.0         27       Brokerage       \$       706,329       \$       720,446       \$       14,117       2.0         28       TPA - Aetna       \$       987,333       \$       1,036,763       \$       49,370       5.0         29       Wellness Coordinator       \$       250,000       \$       -       \$       (25,000)       -       0.0         30       Dental TPA       \$       77,956       \$       -       0.00       .       .						-1.96%
27       Brokerage       \$       706,329       \$       720,446       \$       14,117       2.0         28       TPA - Aetna       \$       987,393       \$       1.036,763       \$       49,370       5.0         29       Wellness Coordinator       \$       25,000       \$       -       \$       (25,000)       -       \$       (25,000)       -       0.00         30       Dental TPA       \$       77,956       \$       -       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       0.00       .       .       .       .       .       .       .       .       .       .       .       .       . <td< td=""><td></td><td></td><td></td><td></td><td></td><td>2.00%</td></td<>						2.00%
28       TPA - Aetna       \$       987,393       \$       1,036,763       \$       49,370       5,500         29       Wellness Coordinator       \$       25,000       \$       -       \$       (25,000)       -       00         30       Dental TPA       \$       77,956       \$       77,956       \$       -       000         31       Actuary       \$       12,734       \$       12,989       \$       255       2.00         32       Auditor       \$       17,811       \$       14,000       \$       (3,811)       -21.4         33       Subtotal Expenses       \$       31,121,251       \$       3,181,133       \$       59,882       11.5         34       - </td <td></td> <td></td> <td></td> <td></td> <td>, , , , , , , , , , , , , , , , , , , ,</td> <td>2.00%</td>					, , , , , , , , , , , , , , , , , , , ,	2.00%
29       Wellness Coordinator       \$       25,000       \$       -       \$       (25,000)       -100.0         30       Dental TPA       \$       77,956       \$       77,956       \$       -       0.0         31       Actuary       \$       12,734       \$       12,989       \$       255       2.0         32       Auditor       \$       17,811       \$       14,000       \$       (3,811)       -21.4         33       Subtotal Expenses       \$       31,121,251       \$       3,181,133       \$       59,882       11.5         34       -<	27	Brokerage	\$ 706,32	9 \$ 720,4	46 \$ 14,117	2.00%
30       Dental TPA       \$       77,956       \$       -       0.0         31       Actuary       \$       12,734       \$       12,989       \$       255       2.0         32       Auditor       \$       17,811       \$       14,000       \$       (3,811)       -21.4         33       Subtotal Expenses       \$       3,121,251       \$       3,181,133       \$       59,882       11.5         34       -						5.00%
31       Actuary       \$       12,734       \$       12,989       \$       255       2.0         32       Auditor       \$       17,811       \$       14,000       \$       (3,811)       -214         33       Subtoal Expenses       \$       3,121,251       \$       3,181,133       \$       59,882       1.15         34       Image: Signal Second S		Wellness Coordinator			( . , ,	-100.00%
32       Auditor       \$ 17,811       \$ 14,000       \$ (3,811)       -21.4         33       Subtotal Expenses       \$ 3,121,251       \$ 3,181,133       \$ 59,882       1.9         34		Dental TPA				0.00%
33       Subtotal Expenses       \$ 3,121,251       \$ 3,181,133       \$ 59,882       1.5         34       Image: Construction of the con		Actuary	\$ 12,73	4 \$ 12,9	<b>39</b> \$ 255	2.00%
34	32	Auditor	\$ 17,81	1 \$ 14,0	00 \$ (3,811)	-21.40%
35       Miscelleneous and Special Services       Image: Misc/Cont(incl. A4 surcharge)       S       42,500       S       42,500       S       42,500       S       -       0.0         36       Misc/Cont(incl. A4 surcharge)       \$       \$       40,000       \$       40,000       \$       -       0.0         37       Claims and Service Audits       \$       40,000       \$       40,000       \$       -       0.0         38       Affordable Care Act Taxes       \$       14,284       \$       14,284       \$       -       0.0         39       Subtotal Misc/Sp Svcs       \$       96,784       \$       96,784       \$       -       0.0         40       -       -       -       -       -       0.0         41       Total Expenses       \$       3,218,035       \$       3,277,917       \$       59,882       1.8         42       -       -       -       -       -       -       -       -	33	Subtotal Expenses	\$ 3,121,25	1 \$ 3,181,13	<b>3</b> \$ 59,882	1.92%
36       Misc/Cont(incl. A4 surcharge)       \$       42,500       \$       42,500       \$       0.0         37       Claims and Service Audits       \$       40,000       \$       40,000       \$       0.0         38       Affordable Care Act Taxes       \$       14,284       \$       14,284       \$       0.0         39       Subtotal Misc/Sp Svcs       \$       96,784       \$       96,784       \$       0.0         40       -       -       -       -       0.0       1.0       1.0       1.0         41       Total Expenses       \$       3,218,035       \$       3,277,917       \$       59,882       1.8         42       -       -       -       -       -       -       -       -	34					
37       Claims and Service Audits       \$       40,000       \$       40,000       \$       -       0.0         38       Affordable Care Act Taxes       \$       14,284       \$       14,284       \$       -       0.0         39       Subtotal Misc/Sp Svcs       \$       96,784       \$       96,784       \$       -       0.0         40       -       -       -       -       -       0.0         41       Total Expenses       \$       3,218,035       \$       3,277,917       \$       59,882       1.8         42       -       -       -       -       -       -       -       -	35	Miscelleneous and Special Services				
37       Claims and Service Audits       \$       40,000       \$       -       0.0         38       Affordable Care Act Taxes       \$       14,284       \$       14,284       \$       -       0.0         39       Subtotal Misc/Sp Svcs       \$       96,784       \$       96,784       \$       -       0.0         40       -       -       -       -       -       0.0         41       Total Expenses       \$       3,218,035       \$       3,277,917       \$       59,882       1.8         42       -	36	Misc/Cont(incl. A4 surcharge)	\$ 42,50	0 \$ 42,5	- 00 \$	0.00%
38       Affordable Care Act Taxes       \$       14,284       \$       14,284       \$       -       0.0         39       Subtral Misc/Sp Svcs       \$       96,784       \$       96,784       \$       -       0.0         40       -       -       -       -       -       0.0         41       Total Expenses       \$       3,218,035       \$       3,277,917       \$       59,882       1.8         42       -       -       -       -       -       -       -	37					0.00%
39         Subtral Misc/Sp Svcs         \$         96,784         \$         96,784         \$         -         0.00           40         -         -         -         -         -         -         0.00           41         Total Expenses         \$         3,218,035         \$         3,277,917         \$         59,882         1.80           42         -						0.00%
40     41     Total Expenses     \$ 3,218,035     \$ 3,277,917     \$ 59,882     1.80       42     41						0.00%
41       Total Expenses       \$ 3,218,035       \$ 3,277,917       \$ 59,882       1.80         42					т Т	0.007
42		Total Exnenses	\$ 3,218.03	5 \$ 3 277 0	7 \$ 50.882	1.86%
		TOUR EXPENSES	φ 3,218,03	σφ <u>σ,</u> 271,9.	.ι φ 33,002	1.0070
		Total Budget	\$ 65,177,59		0 \$ 9,554,567	14.66%

North Jersey Municipal Employee			Proposed		
Benefits Fund	Annualized Assessments FY	2024	Assessments FY2025	Difference \$	Difference %
		-			
Group Name	Total		Total	Total	Total
Berkeley Heights	\$ 2,999	,532	\$ 3,409,704	\$ 410,172	13.67%
Bloomingdale	\$ 1,718	,268	\$ 1,978,728	\$ 260,460	15.16%
Boonton	\$ 2,060	,004	\$ 2,385,120	\$ 325,116	15.78%
Chatham Borough	\$ 1,303	,788	\$ 1,501,752	\$ 197,964	15.18%
Dover Town	\$ 4,614	,864	\$ 5,328,888	\$ 714,024	15.47%
Hanover	\$ 3,362	,808	\$ 3,878,640	\$ 515,832	15.34%
Harding Township	\$ 1,059	,504	\$ 1,218,636	\$ 159,132	15.02%
Hardyston Township	\$ 1,040	,412	\$ 1,191,648	\$ 151,236	14.54%
Jefferson Township	\$ 4,299	,000	\$ 4,962,384	\$ 663,384	15.43%
Kinnelon	\$ 822	,456	\$ 943,188	\$ 120,732	14.68%
Knowlton Board of Education	\$ 686	<b>5,364</b>	\$ 789,468	\$ 103,104	15.02%
Lincoln Park	\$ 2,156	<b>,100</b>	\$ 2,497,740	\$ 341,640	15.85%
Madison	\$ 2,951	,076	\$ 3,378,144	\$ 427,068	14.47%
Madison Housing Authority	\$ 193	,476	\$ 223,020	\$ 29,544	15.27%
Mount Olive Township	\$ 6,016	<b>,30</b> 8	\$ 6,950,076	\$ 933,768	15.52%
Newton	\$ 2,701	,632	\$ 3,117,096	\$ 415,464	15.38%
Pequannock	\$ 2,869	,896	\$ 3,300,828	\$ 430,932	15.02%
Randolph	\$ 5,473	,288	\$ 6,296,424	\$ 823,136	15.04%
Ringwood	\$ 1,663	,200	\$ 1,903,224	\$ 240,024	14.43%
Sparta	\$ 4,893	,900	\$ 5,667,120	\$ 773,220	15.80%
Vernon	\$ 3,470	,532	\$ 4,021,932	\$ 551,400	15.89%
Wantage	\$ 585	,888	\$ 671,016	\$ 85,128	14.53%
West Milford	\$ 4,044	,996	\$ 4,658,592	\$ 613,596	15.17%
Wharton	\$ 1,040	,484	\$ 1,196,592	\$ 156,108	15.00%
Woodland Park	\$ 2,618	,088	\$ 3,028,368	\$ 410,280	15.67%

# MONTHLY COMPLIANCE LISTING

Monthly Items	<u>Filing Status</u>
Budget	Filed
Assessments	Filed
Actuarial Certification	Filed
Reinsurance Policies	Filed
Fund Commissioners	Filed
Fund Officers	Filed
Renewal Resolutions	Filed
Indemnity and Trust	Filed
New Members	N/A
Withdrawals	N/A
Risk Management Plan and By Laws	Filed
Cash Management Plan	Filed
Unaudited Financials	9/30/2023 Filed
Annual Audit	12/31/2022 filed
Budget Changes	N/A
Transfers	N/A
Additional Assessments	N/A
Professional Changes	N/A
Officer Changes	N/A
RMP Changes	Filed
Bylaw Amendments	N/A
Contracts	Filed
Benefit Changes	N/A
-	

#### **RESOLUTION NO. 24-29**

## NORTH JERSEY MUNICIPAL EMPLOYEE BENEFITS FUND INTRODUCTION OF THE 2025 PROPOSED BUDGET

**WHEREAS**, The North Jersey Municipal Employee Benefits Fund is required under State regulation to adopt an annual budget in accordance with the Fiscal Affairs Law; and

WHEREAS, a quorum of the Executive Committee met on September 26, 2024 in Public Session to introduce the proposed budget for the 2025 Fund Year; and

**BE IT FURTHER RESOLVED** that a hearing on the 2025 budget in the amount of **\$74,858,055** shall be held at the Fund's regularly scheduled and advertised meeting of October 24, 2024, to be held at Randolph Township Hall at 9:30am. The 2025 budget shall be considered for adoption at a second reading at that time and after the completion of a public hearing.

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

ADOPTED: September 26, 2024

BY:

CHAIRPERSON

ATTEST:

SECRETARY





#### 77 Market Street • P.O. Box 100 • Park Ridge, New Jersey 07656 • Phone (201) 573-1000 • Fax (201)573-1004

**TO:** Executive Committee

North Jersey Municipal Employee Benefits Fund

- **FROM:** The Vozza Agency Office of the Program Manager
- DATE: September 26, 2024
- RE: Program Manager's Report
  - Town Visits/Meetings/Plan Change Requests
  - Enrollment, Eligibility and Billing
  - Open Enrollment
  - Committee Meetings
  - Express Scripts
  - ➤ Wellness

## TOWN VISITS/MEETINGS/PLAN CHANGE REQUESTS

Our office frequently works with towns for review of plan options for union negotiations. If anyone is entering union negotiations and needs assistance, please feel free to contact our office directly to discuss.

# ENROLLMENT, ELIGIBILITY, BILLING

The funds policy is to limit retro corrections, including terminations to 60 days. Please check your monthly invoice for accuracy. If you find a discrepancy, please report it immediately to the NJHIF enrollment Team at <u>northernnjenrollments@permainc.com</u>

# Use of the WEX (formerly Benefits Express) enrollment system is mandatory.

# **Online Enrollment System Training Schedule – 2024**

**UPDATE NOTICE FOR ALL WEX USERS:** There has been a new update to the WEX system that could affect your member termination process, where the "Quick Term" option has been removed. To accommodate this change, we have provided updated termination instructions attached separately for your reference. Going forward, please review these instructions and follow the updated process when terminating a member. Afterward, you can access the quick look feature to confirm coverage is ending on the desired date. You can also reach out to the enrollment team if you need assistance.

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

Wednesday -	October 16th 10:00 am - 11:00 am
Wednesday -	November 20th 10:00 am - 11:00 am

Please email Austin Flinn at PERMA to join a training session.

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 to your email so an invite can be sent. Email: <u>HIFTraining@permainc.com</u>

I have also attached an updated enrollment team contact list for your reference.

# 2024 OPEN ENROLLMENT

The NJMEBF will be holding open enrollment for the 2024 plan year from 10/28/2024 - 11/08/2024. All changes must be processed online in Benefits Express by 11/17/202 in order for ID cards to be generated for any members making plan changes and in member's hands by January 1, 2025.

## **COMMITTEE MEETINGS**

## **Operations Committee**

The Operations Committee met on September 11<sup>th</sup> to discuss new member submissions. Other than Mendham Township, the Operations Committee is recommending placing a moratorium on new membership to allow the new groups to accumulate a surplus.

**Motion:** Motion to accept the recommendation of the Operations Committee of a moratorium on new membership through the end of the plan year.

#### **Finance Committee**

The Finance Committee met on September 17<sup>th</sup> to discuss the 2025 budget. Our office has been working with Perma on the development of the budget and presented a claims analysis to Committee members for review and discussion. Copy of analysis is attached. Results of the meeting will be provided by others during the meeting.

### AETNA

Our office has been advised that Aetna is currently in negotiations with Mount Sinai Health System. While negotiations are on-going, Mount Sinai Health System has agreed to extend their contract through November 8, 2024. 17 NJHIF members have accessed the health system in the past 12 months.

# Metro New York Aetna network - Negotiations with Mount Sinai Health System for an effective Date of October 01, 2024

# Highlights

- Our contract with Mount Sinai Health System Hospital and Physicians is set to expire October 1, 2024.
- Mount Sinai Health System has hospital, ancillary and physician locations in Kings, New York, Queens, Suffolk, Nassau, and Westchester counties.
- Aetna and Mount Sinai Health System are in active negotiations.
- There will not be an adequacy issue because of the termination.
- The NY State 2-month Cooling Off period will not apply to members in fully insured commercial plans. For these members, the hospital will be out-of-network effective 10/01/2024.
- Due to differing requirements on when we need to notify members, letters will mail in a staggered approach. See the Member Letters section below for timing.

- Mount Sinai Health System advised their medical staff on 8/7/2024 of the upcoming 10/1/2024 termination.
- Mount Sinai Health System notified some plan sponsors on 8/8/2024 of the upcoming 10/1/2024 termination.

If an agreement is reached after these notices have been mailed, retraction letters will be sent to all members who received the initial notification.

# **EXPRESS - SCRIPTS**

# ENCIRCLE RX PROGRAM - GLP-1 DRUGS Update

As presented in our May report, the Encircle Program establishes specific criteria that must be met for the approval of a GLP-1 drug being prescribed for weight loss such as BMI and enrollment in a lifestyle modification program.

# Effective September 1, 2024

Members with new prescriptions or renewing a Prior Authorization for weight loss medication(s) will need to meet the new criteria in order to be approved for a GLP-1 weight loss medication:

- BMI > 32 **OR**
- BMI between 27 < 32 WITH 2 or more documented comorbidities

Members who have a current PA (Prior Authorization) on file will be grandfathered until their PA expires.

# Effective January 1, 2025,

Any new members or members who already have an approved PA for one of the GLP-1 weight loss medications will need to engage in the mandatory guidelines of the program.

- 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 Pre-programmed to the member's ESI account prior to delivery. The scale will record each weigh-in by the member automatically the member does not need to upload the data into their ESI account. **Members must weigh-in a minimum of 4 times per month.**
- Members must engage with an assigned online Omada coach via a mobile application or web browser a minimum of 4 times per month.
- If members do not adhere to the mandatory requirements of the program following the month in which they are noncompliant, they will not be able to refill their weight loss medication.

Members will be required to complete the missing weigh-ins and / or online coaching engagement(s) in order to refill their medication.

Members receiving approval will receive the Omada welcome kit and will need to adhere to the Encircle program as outlined above.

# Mail Order Scripts

ESI has advised that beginning October 1, 2024, they will no longer be stocking a limited set of medications at their mail order facilities. Member communications have been sent to impacted members. There are 32 members impacted by this change. A copy of the list of drugs affected by this change is included with our report.

Patients that have filled an impacted medication in 2024 will receive proactive communications, notifying them 30 days in advance of the change. Patients have the option to fill an alternative drug at home delivery, but those who want or need to continue filling their medication will need to do so from an alternative pharmacy, such as an in-network retail location.

Should a member try to fill one of the medications impacted by this change, Express-Scripts process will route the home delivery order to a team that will outreach to the physician and / or patient in support of communicating that the medication is not stocked and support seeking a physician approved alternative covered medication or direct the patient to utilize a retail pharmacy. If appropriate, patients may choose to speak to their physician about an alternative medication that is stocked by the Express-Scripts mail pharmacy.

NDC	BRAND_NAME	Therapy
00173087410	ARNUITY ELLIPTA	ASTHMA
00173087610	ARNUITY ELLIPTA	ASTHMA
00173088810	ARNUITY ELLIPTA	ASTHMA
00006000530	BELSOMRA	SLEEP DISORDERS
00006003330	BELSOMRA	SLEEP DISORDERS
00006032530	BELSOMRA	SLEEP DISORDERS
00006033530	BELSOMRA	SLEEP DISORDERS
68968051408	COMBIPATCH	HORMONAL SUPPLEMENTATION
68968052508	COMBIPATCH	HORMONAL SUPPLEMENTATION
00597002402	COMBIVENT RESPIMAT	COPD
00078065967	ENTRESTO	HEART DISEASE
00078069667	ENTRESTO	HEART DISEASE
00078077767	ENTRESTO	HEART DISEASE

Only the drugs with the specific NDC noted on the attached are impacted.

57599000101	FREESTYLE LIBRE 14 DAY	DIABETES
57599080000	FREESTYLE LIBRE 2 SENS	DIABETES
57599081800	FREESTYLE LIBRE 3 SENS	DIABETES
00430042014	LO LOESTRIN FE	CONTRACEPTIVES
59310030240	QVAR REDIHALER	ASTHMA
59310030480	QVAR REDIHALER	ASTHMA
70727049725	RHOPRESSA	GLAUCOMA
70727052925	ROCKLATAN	GLAUCOMA
00456150055	SAVELLA	PAIN/INFLAMMATION
00456151060	SAVELLA	PAIN/INFLAMMATION
00456151260	SAVELLA	PAIN/INFLAMMATION
00456152560	SAVELLA	PAIN/INFLAMMATION
00456155060	SAVELLA	PAIN/INFLAMMATION
64764072030	TRINTELLIX	DEPRESSION
64764073030	TRINTELLIX	DEPRESSION
64764075030	TRINTELLIX	DEPRESSION
65649000330	TRULANCE	GI DISORDERS
24208050402	VYZULTA	GLAUCOMA
24208050405	VYZULTA	GLAUCOMA

# Notice of Creditable Coverage (NOCC)

The Express Scripts annual mailing campaign for the 2025 Notice of Creditable Coverage (NOCC) is about to begin. The CMS Annual Open Enrollment period for the 2025 plan year is October 15th through December 7th. Our office has completed the letter template for the NJHIF members who will be reaching or have reached the age of 65 and are Medicare eligible and have their RX coverage with Express Scripts. Express – Scripts will be mailing the letters no later than the week of September 18th.

#### WELLNESS

**Committee Meetings**: The Wellness Committee met via teams meeting on 9/4/2024. A preliminary budget was presented and reviewed by the committee. Our office has been working with Atlantic health systems to see if they have any additional screenings that can be completed on site and in the current structure of the program. We have received proposals which will be reviewed by the contracts committee after the approval of the budget. Our office has worked diligently with the wellness committee to introduce lower cost on-site screenings which you will see reflected in the proposed wellness budget.

**Incentive Cards** - A reminder for current wellness participants that your 2024 cards have an expiration date. Please use them before they expire!

**Newsletter** – 80% of our membership is utilizing the resources and links provided through the newsletter.

Educational Seminars - Valley has completed 19 live webinars with over 500 views

# **Express Scripts**

By EVERNORTH

# **Emerging Therapeutics: DrugWatch**

July 2024

#### Pipeline Drugs: A Closer Look

In each issue of DrugWatch, the Emerging Therapeutics Department highlights one traditional and one specialty pipeline product with near-term approval expected.

Traditional Pipeline					
Drug: benzgalantamine Action Date: July 27, 2024					
Manufacturer: Alpha Cognition	Route: Oral				
Indication: Alzheimer's dementia					

#### Comments:

Benzgalantamine, from Alpha Cognition, is a prodrug of the acetylcholinesterase inhibitor galantamine (Razadyne®/generics) for treating mild to moderate Alzheimer's disease (AD). It's designed to reduce gastrointestinal adverse effects, such as nausea, vomiting and diarrhea, by remaining inert while it passes through the stomach. Studies showed bioequivalence to galantamine and galantamine ER, with adverse events below 2% and no insomnia observed. AD is estimated to affect 6.2 million Americans aged 65 years and older. This drug is currently under FDA review, with a target action date of July 27, 2024.

#### **Specialty Pipeline**

Drug: afamitresgene autoleucel Action Da		Action Da	te: Aug. 4, 2024
Manufacturer: Adaptimmune		Route:	Intravenous
Indicatio	on: Synovial sarcoma		

#### Comments:

Adaptimmune's afamitresgene autoleucel (afami-cel) is a MAGE A4 genebased cell therapy for the treatment of HLA-A\*02-eligible and MAGE-A4positive patients with advanced synovial sarcoma. Synovial sarcoma is a type of soft tissue sarcoma that originates in the tissue around the joints, including the hip, knee, ankle, elbow, wrist, and shoulder. According to Adaptimmune, approximately 500 people in the U.S. may be candidates for treatment with afami-cel. It is administered as a one-time intravenous (IV) infusion. A phase II study found an overall response rate of 36%. Cytokine release syndrome (CRS) occurred in 72% of patients who took afami-cel. FDA is expected to rule on its approval by Aug. 4, 2024.

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#### FDA Action Dates

Products in the table below are currently under FDA review with near-term FDA action dates.

Drug	Manufacturer	Use	s	Action Date
benzgalantamine	Alpha Cognition	Alzheimer's Disease		Jul-27
Dasynoc (dasatinib)	Xspray Pharma	Chronic Myeloid Leukemia	s	Jul-31
deuruxolitinib	Sun	Alopecia Areata	S	July 2024
Tevimbra (tislelizumab-jsgr)*	BeiGene	Gastric Cancer	S	July 2024
brimonidine 0.35% (PDP-716)	Visiox/Sun	Glaucoma		Q3:2024
Yutrepia (treprostinil)	Liquidia Technologies	PAH	S	Q3:2024
lebrikizumab	Eli Lilly	Atopic Dermatitis	S	H2:2024
afamitresgene autoleucel	Adaptimmune	Sarcoma	S	Aug-04
carbidopa/levodopa, e.r. (IPX203)	Amneal	Parkinson's Disease		Aug-08
Humacyl (human acellular vessel)	Humacyte	Vascular Repair		Aug-10
midomafetamine (MDMA)	Lykos	PTSD		Aug-11
nemolizumab	Galderma	Prurigo Nodularis	S	Aug-12
Lymphir (denileukin diftitox)	Citius	Cutaneous T Cell Lymphoma	s	Aug-13
seladelpar	Gilead Sciences	PBC	S	Aug-14
TransCon PTH (palopegteriparatide)	Ascendis Pharma	Hypoparathyroidism	S	Aug-14
Fabhalta (iptacopan)*	Novartis	IgA Nephropathy	S	Aug-15
vorasidenib	Servier	Glioma	S	Aug-20
linvoseltamab	Regeneron	Multiple Myeloma	S	Aug-22
Jemperli (dostarlimab)*	GSK	Endometrial Cancer	S	Aug-23
axatilimab	Syndax/Incyte	Graft-vs-Host Disease	S	Aug-28
Filspari (sparsentan)*	Travere /Retrophin	IgA Nephropathy	S	Sep-05
Lumryz (sodium oxybate, CR)	Avadel	Narcolepsy	S	Sept-07
Tremfya (guselkumab)*	Janssen	Ulcerative Colitis	S	Sep-11
Dupixent (dupilumab)*	Regeneron/Sanofi	Nasal Polyps	S	Sep-13
Ocrevus SC (ocrelizumab)*	Genentech	Multiple Sclerosis	S	Sep-13
Tecentriq SC (atezolizumab)	Genentech/Halozyme	NSCLC		Sep-15
tradipitant	Vanda	Gastroparesis		Sep-18
Rybrevant (amivantamab-vmjw)*	Janssen	NSCLC	S	Sep-20
Miplyffa (arimoclomol)	Zevra	NPD	S	Sep-21
acetylleucine	IntraBio Inc.	NPD	S	Sep-24
revumenib	Syndax	Leukemia	S	Sep-26

\* = New Indication; "S" = Specialty

NPD=Niemann-Pick disease; NSCLC=Non-Small Cell Lung Cancer; PTSD= Post-Traumatic Stress Disorder PBC=Primary Biliary Cholangitis; PAH= Pulmonary Arterial Hypertension

# **Express Scripts**

By EVERNORTH

### **Emerging Therapeutics: DrugWatch**

July 2024

#### **FDA Updates**

#### **Recent New Drug Approvals**

Date	Drug	Manufacturer	Use	S
Jun. 20	PiaSky (crovalimab-akkz)	Genentech	Paroxysmal Nocturnal Hemoglobinuria	S
Jun. 25	Tepylute (thiotepa)	Shorla Pharma	Ovarian Cancer	S
Jun. 26	Ohtuvayre (ensifentrine)	Verona Pharma	COPD	S
Jun. 28	Chewtadzy (tadalafil chewable tablets)	ANI	Erectile Dysfunction	
Jun. 28	Pyzchiva (ustekinumab-ttwe)	Sandoz/ Samsung Bioepis	Plaque Psoriasis	s
Jun. 28	Ahzantive (aflibercept-mrbb)	Formycon/Coherus	Age-related Macular Degeneration	S
Jun. 28	Nypozi (filgrastim-txid)	Tanvex	Neutropenia	S
Jul. 02	Kisunla (donanemab-azbt)	Lilly	Alzheimer's Disease	S

S" = Specialty

#### **Recent First-Time Generic Launches**

Date	Drug	Manufacturer	Use	Annual Sales^
Jun. 22	Victoza	Novo Nordisk	Diabetes	\$3,677 (AG Only)
Jun. 12	Endari	Emmaus	Sickle Cell Disease	\$20

^ = Million

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#### Patent Expirations: 2024

In 2024, around \$12 billion worth of first-time generics may be released. The table below shows the products losing patent protection in 2024. As always, availability of generic is subject to final FDA approval.

Drug	Manufacturer	Use	Patent Expiration	Annual Sales*
Alrex	Bausch & Lomb	Ophth. Anti-Allergic	Generic	\$45
FML	Allergan	Ophth. Anti-Inflammatory	Generic	\$62
Gralise	Depomed	Nerve Pain	Generic	\$100
Emflaza / susp	PTC Therapeutics	Muscular Dystrophies	Generic	\$214
Rectiv	Allergan	Anal Fissures	Generic	\$21
Myrbetriq Tabs	Astellas	Overactive Bladder	Generic	\$2,858
Estrogel	Ascend	HRT	Generic	\$17
Halaven	Eisai	Cancer	Generic	\$108
Radicava (IV)	Mitsubishi	Muscular Dystrophies	Generic	\$329
Victoza	Novo Nordisk	Diabetes, Type 2	AG Only	\$3,677
Endari	Emmaus	Sickle Cell Disease	Generic	\$20
Slynd	Exeltis	Contraceptives	Aug. 21	\$166
Sprycel	Bristol-Myers Squibb	Cancer	Sept. 2024	\$2,296
Sustol	Heron	Nausea/Vomiting	Sep. 28	\$16
Prialt	Elan	Pain	Oct. 01	\$28
Qsymia	Actavis	Weight Loss	Dec. 01	\$42
Pradaxa (pellets)	BI	Anticoagulant	Dec. 22	<\$10
Tasigna	Novartis	Cancer	H2:2024	\$1,166
Byetta	AstraZeneca	Diabetes, Type 2	2024	\$62
Flovent HFA	GlaxoSmithKline	Asthma	2024	\$1,875
Folotyn	Allos	Cancer	2024	\$36
Gattex	Shire	Short Bowel Syndrome	2024	\$170
Ixempra	R-Pharm	Cancer	2024	\$14
Neupro Patch	UCB Pharma	Parkinson's Disease	2024	\$142
Rayos	Horizon Pharma	Inflammation	2024	\$120
Teflaro	Allergan	Infections	2024	\$171
Vesicare LS	Astellas	Overactive Bladder	2024	<\$10
Isentress 400mg	Merck	HIV	2024+	\$324
Ventavis	Actelion	Pulmonary Hypertension	2024+	\$10
Saxenda	Novo Nordisk	Weight Loss	2024+	\$1,135

\* Millions (IQVIA sales [2022]); \*= Settlement Agreement; Pending = Generic approved but launch is pending "Generic" = Generic available; (AG) = Authorized product only "Expired" = no active patents or exclusivities listed in FDA's Orange Book HRT = Hormone Replacement Therapy

# NORTH JERSEY MUNICIPAL EMPLOYEE BENEFITS FUND **BILLS LIST**

Resolution No.			AUGUST 2024	
WHEREAS, the Treasurer has certified that funding is available to pay the following bills:				
	BE IT RESOLVED that the North Jersey Munic herel	by		
	authorizes the Fund treasurer to issue warran			
	FURTHER, that this authorization shall be made	e a permanent part of the records of the rund.		
FUND YEAR 2023				
	VendorName	Comment	InvoiceAmount	
	STATE OF NJ HEALTH BENEFITS FUND	2023 SURCHARGE- ACTUAL 7/22-6/23	5,903.00 <b>5,903.00</b>	
		Total Payments FY 2023	5,903.00	
FUND YEAR 2024	VendorName	<u>Comment</u>	InvoiceAmount	
	STATE OF NJ HEALTH BENEFITS FUND	2024 ESTIM ATED STATE SURCH. 7/23-6/24	4,920.00 <b>4,920.00</b>	
		Total Payments FY 2024	4,920.00	
		TOTAL PAYMENTS ALL FUND YEARS	10,823.00	

Chairperson

Attest:

Treasurer

# NORTH JERSEY MUNICIPAL EMPLOYEE BENEFITS FUND SUPPLEMENTAL BILLS LIST

Resolution No.	AUGUST 2024
WHEREAS, the Treasurer has certified that funding is available to pay the following bills:	
<b>BE IT RESOLVED</b> that the North Jersey Municipal Employee Benefit 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 2024

 VendorName	Comment	<u>InvoiceAmount</u>
UNITED - MEDICARE ADVANTAGE	MEDICARE ADVANTAGE PREMIUM 08/24	44,448.56 <b>44,448.56</b>
DELTA DENTAL OF NEW JERSEY INC	DENTAL TPA 08/24	6,459.56 <b>6,459.56</b>
AETNA	MEDICAL TPA 08/24	82,243.20 <b>82,243.20</b>
INSPIRA FINANCIAL HEALTH, INC INSPIRA FINANCIAL HEALTH, INC	TWP. WEST MILFORD 07/24 TWP OF PEQUANNOCK 07/24	3.00 3.00 <b>6.00</b>
PERMA PERMA	ADMIN FEES 08/24 POSTAGE 07/24	44,482.90 44.85 <b>44,527.75</b>
MICHAEL J. SOCCIO	TREASURER FEE 08/24	1,953.00 <b>1,953.00</b>
JOSEPH L. VOZZA AGENCY INC. JOSEPH L. VOZZA AGENCY INC. JOSEPH L. VOZZA AGENCY INC. JOSEPH L. VOZZA AGENCY INC.	PROGRAM MANAGER FEE 08/24 BROKER FEES 07/24 WELLNESS 08/24 PRIOR PERIOD ADJUSTMENTS 08/24	52,110.62 30,689.94 3,398.55 -104.72 <b>86,094.39</b>
DORSEY & SEMRAU DORSEY & SEMRAU	ATTORNEY RETAINER 08/24 SPECIAL LITIGATION INV 21497 07/24	1,667.00 1,922.00 <b>3,589.00</b>
EMPLOYEE BENEFITS CONSULTING	BROKER FEES 08/24	2,429.52 <b>2,429.52</b>
CORPORATE BENEFIT SOLUTIONS	BROKER FEES 08/24	2,277.88 <b>2,277.88</b>
SKYLANDS RISK MANAGEMENT	BROKER FEES 08/24	10,137.86 <b>10,137.86</b>
BROWN AND BROWN METRO LLC	BROKER FEES 08/24	6,584.11 <b>6,584.11</b>
LIFE LINE SCREENING	DEP. FOR SCREENING 9/18/24 INV 1314	4,250.00 <b>4,250.00</b>
WORLD INSURANCE ASSOCIATES, LLC	BROKER FEES 08/24	1,237.96 <b>1,237.96</b>

Acrisure NJ Partners Ins. Services, LLC	BROKER FEES 08/24	9,755.92 <b>9,755.92</b>
HQSI	CASE # 3373266-240515-MRHIF-2 5/3/24	625.00 <b>625.00</b>
ACCESS	INV 11038251 DEPT 421 7/31/24	217.22 <b>217.22</b>
MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 08/24	362,412.06 <b>362,412.06</b>
AETNA HEALTH MANAGEMENT, LLC	MEDICARE ADVANTAGE PREMIUM 08/24	269,760.30 <b>269,760.30</b>
	Total Payments FY 2024	939,009.29
	TOTAL PAYMENTS ALL FUND YEARS	939,009.29

Chairperson

Attest:

Treasurer

# NORTH JERSEY MUNICIPAL EMPLOYEE BENEFITS FUND BILLS LIST

#### **Resolution No.**

#### **SEPTEMBER 2024**

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

**BE IT RESOLVED** that the North Jersey Municipal Employee Benefit 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 2024

<u>024</u>	VendorName	Comment	InvoiceAmount
	AETNA HEALTH MANAGEMENT, LLC	MEDICARE ADVANTAGE PREMIUM 09/24	270,082.47 <b>270,082.47</b>
	UNITED - MEDICARE ADVANTAGE	MEDICARE ADVANTAGE PREMIUM 09/24	46,632.56 <b>46,632.56</b>
	DELTA DENTAL OF NEW JERSEY INC	DENTAL TPA 09/24	6,506.32 <b>6,506.32</b>
	AETNA	MEDICAL TPA 09/24	82,085.04 <b>82,085.04</b>
	INSPIRA FINANCIAL HEALTH, INC	TWP. WEST MILFORD 08/24	3.00 <b>3.00</b>
	PERM A PERM A	POSTAGE 08/24 ADMIN FEES 09/24	143.78 44,674.74 <b>44,818.52</b>
	MICHAEL J. SOCCIO	TREASURER FEES 09/24	1,953.00 <b>1,953.00</b>
	JOSEPH L. VOZZA AGENCY INC. JOSEPH L. VOZZA AGENCY INC. JOSEPH L. VOZZA AGENCY INC. JOSEPH L. VOZZA AGENCY INC.	WELLNESS 09/24 PROGRAM MANAGER FEE 09/24 PRIOR PERIOD ADJUSTMENT 09/24 BROKER FEES 09/24	3,393.66 52,121.81 -112.86 30,546.19 <b>85,948.80</b>
	DORSEY & SEMRAU DORSEY & SEMRAU	SPECIAL LITIGATION INV 21589 08/24 ATTORNEY RETAINER 09/24	1,162.50 1,667.00 <b>2,829.50</b>
	EMPLOYEE BENEFITS CONSULTING	BROKER FEES 09/24	2,421.24 <b>2,421.24</b>
	CORPORATE BENEFIT SOLUTIONS	BROKER FEES 09/24	2,226.11 <b>2,226.11</b>
	SKYLANDS RISK MANAGEMENT	BROKER FEES 09/24	10,137.86 <b>10,137.86</b>
	BROWN AND BROWN METRO LLC	BROKER FEES 09/24	6,709.42 <b>6,709.42</b>

WORLD INSURANCE ASSOCIATES, LLC	BROKER FEES 09/24	1,172.71 <b>1,172.71</b>
Acrisure NJ Partners Ins. Services, LLC	BROKER FEES 09/24	10,057.17 <b>10,057.17</b>
MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 09/24	360,982.86 <b>360,982.86</b>
	Total Payments FY 2024	934,566.58
	TOTAL PAYMENTS ALL FUND YEARS	934,566.58

Chairperson

Attest:

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

Treasurer

North Jersey Municipal Employee Benefits Fund												
	SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED											
Current Fund Yes	ar: 2024											
Month Endir	ng: July											
	Medical	Dental	Rx	Reinsurance	Dividend Reserve	LFC	Admin	0	0	TOTAL		
OPEN BALANCE	13,374,264.54	43,361.18	(983,637.66)	(79,153.82)	2,367,878.83	0.00	(1,558,767.23)	0.00	0.00	13,163,945.84		
RECEIPTS												
Assessments	4,399,800.82	130,247.25	262,974.32	361,350.11	0.00	0.00	291,235.33	0.00	0.00	5,445,607.83		
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Invest Pymnts	38,062.74	110.38	0.00	149.20	6,027.55	0.00	373.65	0.00	0.00	44,723.52		
Invest Adj	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
Subtotal Invest	38,062.74	110.38	0.00	149.20	6,027.55	0.00	373.65	0.00	0.00	44,723.52		
Other *	365,363.73	986.08	94,042.14	0.00	0.00	0.00	0.00	0.00	0.00	460,391.95		
TOTAL	4,803,227.29	131,343.71	357,016.46	361,499.31	6,027.55	0.00	291,608.98	0.00	0.00	5,950,723.30		
EXPENSES												
Claims Transfers	4,966,622.66	151,289.70	429,396.46	0.00	0.00	0.00	0.00	0.00	0.00	5,547,308.82		
Expenses	0.00	0.00	0.00	363,947.92	0.00	0.00	606,890.43	0.00	0.00	970,838.35		
Other *	20,833.33	0.00	0.00	0.00	0.00	0.00	1,133.13	0.00	0.00	21,966.46		
TOTAL	4,987,455.99	151,289.70	429,396.46	363,947.92	0.00	0.00	608,023.56	0.00	0.00	6,540,113.63		
END BALANCE	13,190,035.84	23,415.19	(1,056,017.66)	(81,602.43)	2,373,906.38	0.00	(1,875,181.81)	0.00	0.00	12,574,555.51		

	Total	0.00	0.00	0.00	30 0.00	0.00	0.00	0.00	0.00
					20				
									1
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0	Medical	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		5.00							
		0 0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0	Medical	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	0.00	7,404.50	0.00	7,404.50	0.00	7,404.50	0.00	7,404.50
		0 0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Closed Year		0.00	7,404.50	0.00	7,404.50	0.00	7,404.50	0.00	7,404.50
Class 4 M	Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Tatal		0.00	0.00	0.00	0.00	0.00		
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2021	Medical	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	155,252.16	0.00	0.00	155,252.16	0.00	155,252.16	155,252.16	0.00
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2022	Medical	155,252.16	0.00	0.00	155,252.16	0.00	155,252.16	155,252.16	0.00
	Total	5,002,027.04	213,488.16	0.00	5,215,515.20	0.00	5,215,515.20	5,002,027.04	213,488.16
		0 0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	154,353.15	0.00	0.00	154,353.15	0.00			0.00
							87,827.89	154,353.15	
	Medical Dental	4,766,034.54	6,188.54	0.00	4,973,334.16	0.00	4,973,334.16	4,766,034.54	6,188.54
2023	Total	<b>25,123,511.41</b> 4,766,034.54	<b>5,326,416.16</b> 207,299.62	0.00	<b>30,449,927.57</b> 4,973,334.16	0.00	<b>30,449,927.57</b> 4,973,334.16	<b>25,123,511.41</b> 4,766,034.54	<b>5,326,416.16</b> 207,299.62
	T- 4 - 1	05 100 511 11	E 224 414 44	0.00	20 440 025 55		20.440.005.55	25 122 511 15	E 206 416 46
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	2,479,230.33	429,396.46	0.00	2,908,626.79	0.00	2,908,626.79	2,479,230.33	429,396.46
	Dental	734,833.18	145,101.16	0.00	879,934.34	0.00	879,934.34	734,833.18	145,101.16
2024	Medical	21,909,447.90	4,751,918.54	0.00	26,661,366.44	0.00	26,661,366.44	21,909,447.90	4,751,918.54
Year	Coverage	Last Month	July	July	July	July	Reconciled	Variance From	Month
Policy		Paid Thru	Net Paid	Recoveries	Paid Thru	Paid Thru	То Ве	Unreconciled	This
		Calc. Net	Monthly	Monthly	Calc. Net	TPA Net	Variance	Delinquent	Change
		1.	2.	3.	4.	5.	6.	7.	8.
Current Fi	und Year	2024							
Month		July							
			No	orth Jersev Muni	cipal Employee Benefi	ts Fund			

SUMMARY OF CASH AND INVESTM	ENT INSTRUMENT	S				
North Jersey Municipal Employee Ber	nefits Fund					
ALL FUND YEARS COMBINED						
CURRENT MONTH	July					
CURRENT FUND YEAR	2024					
	Description:	CASH MANAGEMENT FUND	TD BANK ASSET MANAGEMENT		Investors Bank	CITIZENS
	ID Number:					
	Maturity (Yrs)					
	Purchase Yield:					
	TO TAL for All ets & instruments					
Opening Cash & Investment Balance	\$13,163,945.70	3254030.19	7488401.61	-	0	2421513.9
<b>Opening Interest Accrual Balance</b>	\$77,382.10	0	77382.1	0	0	0
	¢21,200,00	<b>*</b> 0.00	¢21,200,00			
1 Interest Accrued and/or Interest Cost	\$31,288.99	\$0.00	\$31,288.99	\$0.00	\$0.00	\$0.00
2 Interest Accrued - discounted Instr.s	\$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
4 Accretion	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5 Interest Paid - Cash Instr.s	\$31,473.40	\$14,625.34	\$1,840.50	\$0.00	\$0.00	\$15,007.56
6 Interest Paid - Term Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7 Realized Gain (Loss)	\$13,250.12	\$0.00	\$13,250.12	\$0.00	\$0.00	\$0.00
8 Net Investment Income	\$76,012.51	\$14,625.34	\$46,379.61	\$0.00	\$0.00	\$15,007.56
9 Deposits - Purchases	\$5,885,166.45	\$0.00	\$0.00	\$0.00	\$0.00	\$5,885,166.45
10 (Withdrawals - Sales)	-\$6,519,280.30	\$0.00	-\$1,133.13	\$0.00	\$0.00	-\$6,518,147.17
Ending Cash & Investment Balance	\$12,574,555.37	\$3,268,655.53	\$7,502,359.10	\$0.00	\$0.00	\$1,803,540.74
Ending Interest Accrual Balance	\$108,671.09	\$0.00	\$108,671.09	\$0.00	\$0.00	\$0.00
Plus Outstanding Checks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
(Less Deposits in Transit)	-\$367,508.00	\$0.00	\$0.00	\$0.00	\$0.00	-\$367,508.00
Balance per Bank	\$12,207,047.37	\$3,268,655.53	\$7,502,359.10	\$0.00	\$0.00	\$1,436,032.74

### **RESOLUTION NO. 24-30**

# NORTH JERSEY MUNICIPAL EMPLOYEE BENEFITS FUND APPROVAL OF THE AUGUST AND SEPTEMBER 2024 BILLS LISTS

**WHEREAS**, the North Jersey Municipal Employee Benefits Fund held a Public Meeting on **September 26**, **2024** 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 August and September 2024 for consideration and approval of the Executive Committee; and

**WHEREAS**, The Treasurer for the Fund presented a Treasurers Report which detailed the claims payments and imprest transfers for the Fund for the Month of July for all Fund Years for consideration and approval of the Executive Committee; and

**WHEREAS**, a quorum of the Executive Committee was present thereby conforming with the By-laws of the Fund to conduct official business of the Fund,

**NOW THEREFORE BE IT RESOLVED** the Commissioners of the Executive Committee of the North Jersey Municipal Employee Benefits Fund hereby approve the Bills List for August and September 2024 prepared by the Treasurer of the Fund and duly authorize and concur said bills to be paid expeditiously, in accordance with the laws and regulations promulgated by the State of New Jersey for Municipal Health Insurance Funds.

**NOW, THEREFORE BE IT FURTHER RESOLVED,** the Commissioners of the Executive Committee of the North Jersey Municipal Employee Benefits Fund hereby approve the Treasurers Report as furnished by the Treasurer of the Fund and concur with actions undertaken by the Treasurer, in accordance with the laws and regulations promulgated by the State of New Jersey for Municipal Health Insurance Funds.

ADOPTED: September 26, 2024

BY:\_\_\_\_\_ CHAIRPERSON

ATTEST:

SECRETARY

FRED SEMRAU\* DAWN M. SULLIVAN\*\* SUSAN C. SHARPE\*\* ROBERT ROSSMEISSL\*\* EDWARD PASTERNAK\*\* JONATHAN TESTA\*\* KYLE FISHER NICHOLAS WALL JEFF FRANKENBURGER \*PARTNER \*\* SENIOR ASSOCIATE

# DORSEY & SEMRAU

ATTORNEYS AT LAW 714 MAIN STREET BOONTON, NJ 07005 973-334-1900 FACSIMILE 973-334-3408 IN MEMORIAM JOHN H. DORSEN (1937-2018)

### <u>Memorandum</u> Privileged and Confidential

То:	NJMEBF Claims Committee	
From:	Fred Semrau, Esq. Ed Pasternak, Esq.	
Date:	9/17/24	

Re: Notice of Non-Pursuit on Pre-Litigation Demand "CV"

Kindly accept this short memorandum as to Notice of Non-Pursuit on the above-noted matter. By way of brief executive summary, the Plaintiff has agreed to not seek any further payment on a previously submitted pre-litigation demand for a covered plan member.

# I. Background and Procedural History:

Patient "CV" is a covered plan member. On January 15, 2020 "CS" underwent spinal repair surgery to address her lumbar stenosis. Dr. Most, and with Dr. Alapat assisting as a co-surgeon from Elite Surgical Specialists ("Elite"), performed the surgery. Elite submitted charges of \$86,000, billing Dr. Most as the primary surgeon at \$56,000 and with Dr. Alapat billing as an assisting surgeon at \$30,000. The Fund paid Elite \$2,220.20 for the surgery, plus an additional \$31,595.13, which importantly was not reflected in the demand letter that was made by Plaintiff's counsel.

As basis for the demand, the provider sought an additional payment of \$50,000 based on the ("OON") reimbursement provided – but only reflecting the \$2,220.00 amount first paid.

However, upon further investigation by the Vozza Agency and by separate inquiries to Aetna, it was discovered that the additional payment of \$31,595.13 was made via an electronic funds transfer. When this additional payment was brought to the attention of counsel, counsel advised it was unaware of the additional payment, and thereafter upon a series of negotiations, Plaintiff's counsel advised our office in

writing that they would be closing their file, and would not be seeking any additional payments for this claim.

# **II.** <u>The Recommendation:</u>

This record credibly reflects that this member's surgery was authorized as medically necessary, and indeed an "in-network GAP exception" was granted to Dr. Most under an authorization number (938312901), which was later confirmed in writing to Dr. Most on November 19, 2019. As such, the all payments made were proper. After Plaintiff internally confirmed that this additional payment was made, Plaintiff's counsel apologized for the error, asserted her office was unaware of the later payment--and notwithstanding it being made before the pre-litigation offer was made.

We are thus very pleased to advise that pursuant to this investigation and negotiations with Plaintiff's counsel that Plaintiff will not seek any further payment as to this matter, and has closed their file, and that there will be no litigation filed based on this record. In sum, and as this matter was a pre-litigation demand with no docketed complaint filed in court, the matter may now be closed without any further action or review.

If you have any questions, please do not hesitate to contact us.



# NORTH JERSEY MUNICIPAL EMPLOYEE BENEFITS FUND

**Monthly Claim Activity Report** 

September 26, 2024

		00 2	etr			
				D		
	NORTH JERSEY N	MUNICIP	AL EMPL	OYEE BENEFITS	FUND	-
	MEDICAL CLAIMS			MEDICAL CLAIMS		
	PAID 2022	# OF EES	PER EE	PAID 2023	# OF EES	PER EE
JANUARY	\$2,295,816	1,496	\$ 1,535	\$3,931,217	1,920	\$ 2,048
FEBRUARY	\$2,276,872	1,502	\$ 1,516	\$3,769,432	1,881	\$ 2,004
MARCH	\$2,379,988	1,503	\$ 1,583	\$2,964,735	2,084	\$ 1,423
APRIL	\$2,612,511	1,605	\$ 1,628	\$4,417,158	2,094	\$ 2,109
MAY	\$3,090,950	1,668	\$ 1,853	\$4,419,584	2,098	\$ 2,107
JUNE	\$3,170,703	1,662	\$ 1,908	\$3,489,075	2,091	\$ 1,669
JULY	\$2,465,662	1,669	\$ 1,477	\$4,264,290	2,087	\$ 2,043
AUGUST	\$3,717,731	1,719	\$ 2,163			
SEPTEMBER	\$2,976,764	1,836	\$ 1,621			
OCTOBER	\$3,092,101	1,865	\$ 1,658			
NOVEMBER	\$2,906,862	1,866	\$ 1,558			
DECEMBER	\$3,142,985	1,880	\$ 1,672			
TOTALS	\$34,128,946			\$27,255,491		
				2024 Average	2,036	\$1,915
				2023 Average	1,689	\$1,681

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

Plan Sponsor Unique ID : Customer: Group / Control:	All North Jersey Municipal Employee Benefits Fund 00727848,00866355,SI220763	Paid Dates: Service Dates: Line of Business:	07/01/2024 - 07/31/2024 01/01/2011 - 07/31/2024 All
	Paid Am		
	\$400,504.44	L	
	\$169,883.58	i	
	\$127,902.45	i	
Total:	\$698,290.47		

<b>♥aetna</b> ™	
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North Jersey Municipal Employee Benefits Fund

8/1/2023 through 7/31//2024 (unless otherwise noted)



Medical Claims Paid: January 2024- July 2024 Total Medical Paid per EE: <b>\$1,915</b>						
Inpatient: 67.4% Ambulatory: 69.2% Physician/Other: 67.6% TOTAL: 68.1%	Ac To Me Su					
Provider Network % Admissions In-Network: 95.6% % Physician Office: 92.0% Aetna Book of Business: Admissions 98.5%; Physician 90.9%						
Top Facilities Utilized (by total Medical Spend)• Morristown Medical Center• Saint Clare's Hospital• Chilton Medical Center• Newton Medical Center• Cooperman Barnabas Medical	To To To To Me De					

Catastrophic Claim Impact January 2024- July 2024 umber of Claims Over \$50,000: 68 aimants per 1000 members: 13.1 g. Paid per Claimant: \$117,627 ercent of Total Paid: 32.5% Aetna BOB- HCC account for an average of 43.1% of total Medical Cost etna One Flex Member Outreach: thru July 2024 otal Members Identified: 1,059 embers Targeted for 1:1 Nurse upport : 217 embers Targeted for digital activity: 32 ember 1:1 outreach completed: )3 ember 1:1 Outreach in Progress: 14

Teladoc Activity: January 2024 thru July 2024

Total Registrations: Total Online Visits: Total Net Claims Savings: **\$94,014** Total Visits w/ Rx:

Mental Health Visits: **21** Dermatology Visits: **15** 

Service Center Perform Metrics YTD 20	
Customer Service Per	formance
1 <sup>st</sup> Call Resolution:	93.92%
Abandonment Rate:	0.7%
Avg. Speed of Answer:	23.5 sec
Claims Performa	nce
Financial Accuracy: *Q1 2024 -	<mark>99.16%</mark> *
90% processed w/in:	6.4 days
95% processed w/in:	11.2 days
*****	*****
Claims Performance ( (June 2024)	Monthly)
90% processed w/in: 5.	7 days
95% processed w/in: 9. (Note: This is not a PG	
Performance Go	als
1 <sup>st</sup> Call Resolution:	90%
Abandonment Rate less that	an: 3.0%
Average Speed of Answer:	30 sec
Financial Accuracy: Turnaround Time	99%
90% processed w/in:	14 days
OE% proceed w/int	
95% processed w/in:	30 days

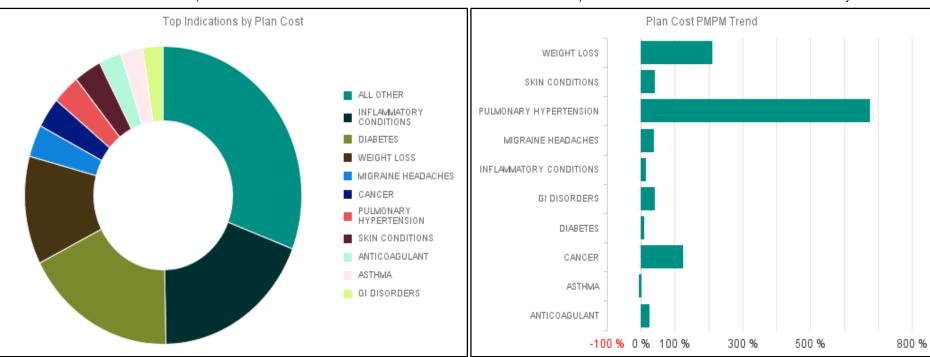


#### North Jersey Municipal Employee Benefits Fund - Monthly Utilization Tracking Report

Total Component/Date of Service (Month)	2023 01	2023 02	2023 03	2023 Q1	2023 04	2023 05	2023 06	2023 Q2	2023 07	2023 08	2023 09	2023 Q3	2023 10	2023 11	2023 12	2023 Q4	2023 YTD
Membership	3,873	3,863	3,887	3,874	4,143	4,320	4,331	4,265	4,342	4,485	4,817	4,548	4,889	4,905	4,919	4,904	4,398
Total Days	153,428	137,350	155,285	446,063	150,154	171,679	168,062	489,895	167,616	182,884	176,070	526,570	193,309	185,189	190,970	569,468	2,031,996
Total Patients	1,550	1,471	1,557	2,318	1,557	1,713	1,694	2,577	1,661	1,720	1,812	2,735	2,001	1,918	2,032	3,017	3,941
Total Plan Cost	\$548,171	\$576,692	\$662,404	\$1,787,268	\$584,221	\$747,892	\$850,782	\$2,182,895	\$810,505	\$893,758	\$835,235	\$2,539,498	\$906,849	\$926,193	\$976,059	\$2,809,101	\$9,318,762
Generic Fill Rate (GFR) - Total	83.3%	84.4%	84.9%	84.2%	85.6%	86.8%	85.0%	85.8%	85.2%	85.5%	83.4%	84.7%	81.7%	84.7%	86.4%	84.3%	84.7%
Plan Cost PMPM	\$141.54	\$149.29	\$170.42	\$153.77	\$141.01	\$173.12	\$196.44	\$170.62	\$186.67	\$199.28	\$173.39	\$186.13	\$185.49	\$188.83	\$198.43	\$190.93	\$176.58
Total Specialty Plan Cost	\$192,512	\$223,063	\$248,701	\$664,276	\$205,135	\$301,686	\$387,694	\$894,515	\$354,876	\$383,566	\$325,876	\$1,064,318	\$352,165	\$397,833	\$435,410	\$1,185,408	\$3,808,517
Specialty % of Total Specialty Plan Cost	35.1%	38.7%	37.5%	37.2%	35.1%	40.3%	45.6%	41.0%	43.8%	42.9%	39.0%	41.9%	38.8%	43.0%	44.6%	42.2%	40.9%

Total Component/Date of Service (Month)	2024 01	2024 02	2024 03	2024 Q1	2024 04	2024 05	2024 06	2024 Q2	2024 07	2024 08	2024 09	2024 Q3	2024 10	2024 11	2024 12	2024 Q4	2024 YTD
Membership	4,905	4,873	5,422	5,067	5,440	5,436	5,427	5,434	5,406								
Total Days	203,129	186,417	209,955	599,501	224,361	220,264	206,816	651,441	238,302								
Total Patients	1,970	1,908	2,198	3,207	2,174	2,116	2,096	3,245	2,161								
Total Plan Cost	\$865,144	\$792,400	\$1,083,124	\$2,740,668	\$1,103,099	\$1,184,908	\$1,238,550	\$3,526,557	\$1,183,573								
Generic Fill Rate (GFR) - Total	86.0%	87.0%	86.5%	86.5%	86.0%	85.8%	84.9%	85.6%	84.4%								
Plan Cost PMPM	\$176.38	\$162.61	\$199.76	\$180.31	\$202.78	\$217.97	\$228.22	\$216.31	\$218.94								
% Change Plan Cost PMPM	24.6%	8.9%	17.2%	17.3%	43.8%	25.9%	16.2%	26.8%	17.3%								
Total Specialty Plan Cost	\$308,439	\$274,926	\$466,338	\$1,049,702	\$465,441	\$510,693	\$521,653	\$1,497,787	\$354,254								
Specialty % of Total Specialty Plan Cost	35.7%	34.7%	43.1%	38.3%	42.2%	43.1%	42.1%	42.5%	29.9%								

#### **Top Indications**



N. JERSEY MUNI EMPLOY BNFT FD (Current Period 01/2024 - 07/2024 vs. Previous Period 01/2023 - 07/2023) Peer = Government - National Preferred Formulary

				Current Period						Previous Period					
Rank	Peer Rank	Indication	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Plan Cost PMPM
1	2	INFLAMMATORY CONDITIONS	27.2 %	408	\$1,401,535	\$37.97	38.7 %	33.7 %	32.8 %	304	\$961,967	\$33.45	41.1 %	39.5 %	13.5 %
2	1	DIABETES	25.8 %	4,321	\$1,326,575	\$35.94	33.2 %	25.8 %	33.2 %	3,301	\$973,089	\$33.84	31.7 %	28.7 %	6.2 %
3	4	WEIGHT LOSS	17.0 %	843	\$873,709	\$23.67	3.2 %	5.2 %	7.5 %	224	\$220,195	\$7.66	12.9 %	10.5 %	209.2 %
4	6	MIGRAINE HEADACHES	5.0 %	395	\$259,616	\$7.03	38.0 %	52.3 %	5.1 %	291	\$148,867	\$5.18	43.6 %	55.8 %	35.9 %
5	3	CANCER	4.7 %	276	\$244,171	\$6.62	94.2 %	75.9 %	2.9 %	195	\$85,991	\$2.99	94.4 %	78.0 %	121.2 %
6	10	PULMONARY HYPERTENSION	4.7 %	14	\$241,062	\$6.53	28.6 %	58.7 %	0.8 %	7	\$24,229	\$0.84	85.7 %	53.4 %	675.2 %
7	5	SKIN CONDITIONS	4.6 %	636	\$236,846	\$6.42	84.6 %	85.5 %	4.5 %	479	\$131,944	\$4.59	87.9 %	88.2 %	39.9 %
8	8	ANTICOAGULANT	3.8 %	454	\$196,531	\$5.32	14.3 %	19.2 %	4.2 %	327	\$123,860	\$4.31	21.4 %	22.1 %	23.6 %
9	7	ASTHMA	3.8 %	1,872	\$193,594	\$5.25	85.5 %	87.9 %	5.5 %	1,519	\$160,341	\$5.58	76.2 %	79.0 %	-5.9 %
10	9	GI DISORDERS	3.4 %	296	\$176,289	\$4.78	42.6 %	56.8 %	3.4 %	219	\$98,497	\$3.42	44.3 %	59.5 %	39.5 %
		Total Top 10		9,515	\$5,149,929	\$139.53	45.9 %	<b>46.</b> 1 %		6,866	\$2,928,981	\$101.85	47.5 %	48.0 %	37.0 %

#### Top Drugs

#### N. JERSEY MUNI EMPLOY BNFT FD (Current Period 01/2024 - 07/2024 vs. Previous Period 01/2023 - 07/2023) Peer = Government - National Preferred Formulary

						Curre	ent Period			Previ	ous 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	11	WEGOVY	WEIGHT LOSS	Ν	438	111	\$531,007	\$14.39	162	51	\$193,989	\$6.75	113.3 %
2	6	STELARA	INFLAMMATORY CONDITIONS	Y	41	7	\$386,691	\$10.48	22	4	\$237,667	\$8.26	26.8 %
3	1	OZEMPIC	DIABETES	Ν	395	75	\$341,242	\$9.25	263	46	\$222,482	\$7.74	19.5 %
4	16	ZEPBOUND	WEIGHT LOSS	Ν	352	83	\$334,154	\$9.05	NA	NA	NA	NA	NA
5	2	MOUNJARO	DIABETES	Ν	307	63	\$297,676	\$8.07	92	25	\$85,369	\$2.97	171.7 %
6	198	TYVASO DPI	PULMONARY HYPERTENSION	Y	10	1	\$240,173	\$6.51	1	1	\$22,895	\$0.80	717.4 %
7	24	ENBREL SURECLICK	INFLAMMATORY CONDITIONS	Y	31	4	\$173,685	\$4.71	21	5	\$101,151	\$3.52	33.8 %
8	26	ELIQUIS	ANTICOAGULANT	Ν	253	52	\$130,288	\$3.53	137	30	\$65,585	\$2.28	54.8 %
9	12	DUPIXENT PEN	SKIN CONDITIONS	Y	43	7	\$116,322	\$3.15	25	6	\$60,752	\$2.11	49.2 %
10	13	SKY RIZI PEN	INFLAMMATORY CONDITIONS	Y	19	3	\$114,093	\$3.09	16	3	\$88,439	\$3.08	0.5 %
11	10	JARDIANCE	DIABETES	Ν	198	33	\$107,603	\$2.92	134	21	\$71,126	\$2.47	17.9 %
12	25	RINVOQ	INFLAMMATORY CONDITIONS	Y	15	4	\$103,761	\$2.81	3	1	\$12,996	\$0.45	522.1 %
13	356	KOSELUGO	CANCER	Y	10	1	\$102,513	\$2.78	NA	NA	NA	NA	NA
14	28	TALTZ AUTOINJECTOR	INFLAMMATORY CONDITIONS	Y	21	4	\$100,339	\$2.72	17	4	\$78,411	\$2.73	-0.3 %
15		TAZVERIK	CANCER	Y	6	1	\$99,871	\$2.71	3	1	\$40,521	\$1.41	92.0 %
16	20	FARXIGA	DIABETES	Ν	175	30	\$90,923	\$2.46	135	23	\$67,391	\$2.34	5.1 %
17	69	HUMIRA(CF)	INFLAMMATORY CONDITIONS	Y	15	2	\$85,998	\$2.33	13	2	\$74,953	\$2.61	-10.6 %
18	35	OTEZLA	INFLAMMATORY CONDITIONS	Y	26	6	\$85,642	\$2.32	19	4	\$59,657	\$2.07	11.9 %
19	4	HUMIRA(CF) PEN	INFLAMMATORY CONDITIONS	Y	13	4	\$84,664	\$2.29	18	3	\$87,998	\$3.06	-25.0 %
20	31	NURTEC ODT	MIGRA INE HEADACHES	Ν	62	15	\$80,650	\$2.19	28	9	\$30,145	\$1.05	108.5 %
21	36	RYBELSUS	DIABETES	Ν	90	15	\$78,347	\$2.12	76	14	\$65,054	\$2.26	-6.2 %
22	18	TRULICITY	DIABETES	Ν	87	15	\$75,906	\$2.06	119	22	\$101,095	\$3.52	-41.5 %
23	34	DUPIXENT SY RINGE	SKIN CONDITIONS	Y	28	4	\$72,398	\$1.96	16	2	\$38,698	\$1.35	45.8 %
24	53	QULIPTA	MIGRA INE HEADACHES	Ν	69	14	\$67,421	\$1.83	44	10	\$38,317	\$1.33	37.1 %
25	44	XARELTO	ANTICOAGULANT	Ν	136	24	\$63,671	\$1.73	119	21	\$52,428	\$1.82	-5.4 %
			Tot	al Top 25	2,840		\$3,965,039	\$107.43	1,483		\$1,897,118	\$65.97	62.9 %

# **A DELTA DENTAL**®

### Hearing Savings Program FAQ



### If you have noticed changes in your hearing, rest easy. Delta Dental of New Jersey has teamed up with Amplifon to offer you hearing healthcare.

#### How can I check my hearing?

Getting your hearing checked is now easier than ever with in-person and at-home options:

- Virtual screening'—allows you to confirm if hearing loss is detected from the comfort of home with the help of an Amplifon care advocate.
- In-person hearing evaluation at an Amplifon network clinic near you. A hearing care
  professional will complete an in-depth evaluation of your hearing and propose solutions if
  hearing loss is detected.

#### What hearing aid options are available?

Today's hearing aids come in a variety of styles and include features like smartphone connection, automatic volume control, and adaptive noise cancellation.

#### How can I pay for hearing aids?

Hearing aids are an investment in your overall health. Here are a few ways to find cost savings to ensure you get the treatment you deserve:



Amplifon savings Amplifon saves members an average of 68% off MSRP."



Financing Amplifon offers interest-free financing to those who qualify. Ask us how to apply.



HSA, HRA, FSA You can use your pre-tax dollars from your health savings accounts to help pay for hearing aids and services.

#### What does your hearing savings program powered by Amplifon include?



Custom hearing solutions Our providers will help you find a solution that best fits your lifestyle and your budget from one of the top brands.





Risk-free trial<sup>\*\*\*</sup> Find your right fit by trying your hearing aids for 60 days. 100% money-back guarantee if not completely satisfied, no return or restocking fees.





Continuous care<sup>\*\*\*</sup> Follow-up care to ensure a smooth transition, a charging station or supply of batteries, and a warranty for loss, repairs, or damage.

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### **Hearing Savings Program**

	Level 1	Level 2	Level 3	Level 4	Level 5
	Hearing aid or	otions from the to	p brands with av	erage savings of	68% off MSRP.
Amplifon Member Price (per ear)	\$995/ear	\$1,295/ear	\$1,495/ear	\$1,895/ear	\$2,195/ear
Virt Person On- 60- Find Corr 1-ye 2-ye	ual services ual screening'—d sonalized coachi demand virtual v day risk-free tria d your right fit by nplimentary afte ar follow-up care ear battery suppo	ng—enhance ad visits—convenier v trying your hea rcare e—ensures smoo ort—battery sup	justment and us nt care for non-o aring aids risk-fr oth transition to	se of hearing aid clinical support ee your new hearin station to keep	ng aids

#### Take the first step: Call 888-232-3439 | TTY: 711 | Hours: Mon-Fri 8am - 8pm ET Visit: DeltaDentalNJ.com/Hearing

You and your provider will determine the best device to meet your hearing loss, lifestyle, and technology needs. Virtual screening does not take the place of a diagnostic exam by a licensed professional. Not all virtual services are available on all products.

"Based on 2024 Internal pricing analysis. Your savings may vary.

Risk-free trial-100% money-back guarantee if not completely satisfied, no return or restocking fees. Follow-up care-for one year following purchase. Batteries-two-year supply of batteries (80 cells/ear/year) or one standard charger at no additional cost. Warranty exclusions and limitations may apply. Contact Amplifon 888-232-3439 for details.

Amplifon Hearing Health Care, Corp. is solely responsible for the administration of hearing health care services, and its own financial and contractual obligations. Delta Dental of New Jersey and Amplifon are independent, unaffiliated companies.





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# **APPENDIX I**

#### NORTH JERSEY MUNICIPAL EMPLOYEE BENEFITS FUND OPEN MINUTES JULY 25, 2024 RANDOLPH MUNICIPAL HALL- 9:30 AM

Meeting of Fund Commissioners called to order by Carrine Piccolo-Kaufer. Open Public Meetings notice read into record.

ROLL CALL OF 2024 EXECUTIVE COMMITTEE	AND FUND COMMISSIONERS
---------------------------------------	------------------------

2024 Executive Committee									
Scott Heck, Chair	Borough of Ringwood	Present (Telephonic)							
Tom Russo, Secretary	Town of Newton	Absent							
Barbara Russo	Township of Berkeley Heights	Absent							
Tammy Smith	Knowlton BOE	Absent							
Silvio Esposito	Township of Hanover	Absent							
Carrine Piccolo- Kaufer	Township of Hardyston	Present							
Greg Poff	Borough of Randolph*	Present							
<b>Executive Committee Alternates:</b>									
Adam Brewer	Township of Pequannock	Present							
Cathy Shanahan	Township of West Milford	Absent							
Dina Valente - Stoel	Borough of Lincoln Park	Present							

Fund Commissioners		Absent
Mike Sondermeyer	Borough of Bloomingdale	Absent
Michael Restel	Township of Wantage	Present
James Zepp	Township of Sparta	Present
Patricia Bussow	Andover Township*	Absent
Ralph Blakeslee	Borough of Netcong*	Absent
Keith Kazmark	Borough of Woodland Park	Absent
Victoria Dobrusin	Township of Dover	Present
Andrew Fiore	Borough of Harding	Absent
Katie Yanke	Borough of Montville*	Absent
Joe Sabatini	Township of Byram*	Absent
James Burnett	Borough of Madison*	Absent
	Township of Prospect Park*	Absent
John Shepherd	Township of Roxbury*	Absent
Debra Millikin	Township of Jefferson*	Present

James Freda	Kinnelon	Absent
Gabby Evangelista	Borough of Wharton	Present
Karen Fornaro	Borough of Chatham	Present
Tina Kraus	Township of Vernon	Present
	Town of Boonton	Absent
	Madison Housing Authority	Absent
Mitchell Stern	Mountain Lakes	Absent
Claudia Quinn	Mt. Olive	Present
Fund Commissioner Alternates		
Ashleigh Frueholz	Township of Byram*	Absent
Jennifer Dodd	Town of Newton	Absent
Lisa Spring	Township of Roxbury*	Absent
Joseph Kovalcik	Borough of Wharton	Absent
Perry Mayers	Borough of Lincoln Park	Present
Jasmin Azcona	Township of Bloomingdale	Absent
Michele Lantau	Township of Sparta	Absent
	Borough of Netcong*	Present
	Township of Dover	Absent
Sandra Emmerich	Borough of Madison*	Absent
Nancy VanHorn	Township of Wantage	Absent
Deborah Bonanno	Randolph Township	Absent
William Egan	Township of Jefferson	Absent
Dana Vitz	Township of Hardyston	Absent
Stephen Williams	Borough of Chatham	Absent
Shawn Bennett	Mountain Lakes	Absent

APPOINTED OFFICIALS PRESENT:

Executive Director	PERMA Risk	Brandon Lodics
	Management Services	Emily Koval
		Caitlin Perkins
Program Manager	Vozza Agency	David Vozza
		Randi Gerber
Attorney	Dorsey & Semrau	Fred Semrau
		Ed Pasternak
Claims Administrator	Aetna	Jason Silverstein
Dental Administrator	Delta Dental	Luhra Ebarle
Prescription Administrator	Express Scripts	Charles Yuk
Treasurer	Michael Soccio	Present
Auditor	Nisivoccia	Bud Jones
Actuary	John Vataha	Absent

#### PRESENT FUND PROFESSIONALS:

Renee Gear, World Insurance Wayne Dietz, Skylands Risk Management Debra Millian, Jefferson Joe Rude, EBCSG Staci Grant, Acrisure Sandra Olivola, Woodland Park

#### FLAG SALUTE

#### MOTION TO APPROVE OPEN MINUTES FOR MAY 23, 2024

MOTION:	Commissioner Brewer
SECOND:	Commissioner Poff
VOTE:	Unanimous

#### **CORRESPONDENCE** - None

**MONTHLY COMMITTEE REPORTS** - Commissioner Kaufer noted that the format for the NJHIF meetings will be changing moving forward. Starting today, there will be monthly committee reports from the chairs of each committee.

<u>CLAIMS COMMITTEE-</u> Commissioner Mayers had one matter to discuss that is reflected in a Resolution 24-28 in the consent agenda. He stated that a member received services from an out of network provider and the provider was told that the rate would be payable for those services. The provider was paid the incorrect amount and pursued to file a complaint with the New Jersey Superior Court. The Fund's legal council was able to negotiate an agreement where the complaint will be paid and as part of this agreement, Aetna will pay a large contribution to the settlement. The committee recommends approving the resolution for this settlement agreement.

<u>CONTRACTS COMMITTEE-</u> Commissioner Poff represented the contract committee since Commissioner Smith was absent. Commissioner Poff mentioned that the Attorney and Executive Director was also in attendance for the meeting who reviewed the terms of existing contracts for professionals whose contracts are expiring at the end of the year. Fund Attorney and Executive Director left the meeting at that point for the committee members to consider their contracts as well. Commissioner Poff stated the committee recommends soliciting a RFP for the Program Manager and Actuarial Services, once they have the opportunity to review the scope of work to see if that needs to be modified. The committee recommends extending the remaining Attorney, Treasurer, and Executive Director contracts.

The Fund Attorney noted that, historically, once the recommendation is made, it has been addressed through a resolution, effectively appointing the professionals. After further review, it is advised that the committee's recommendation should remain in place, but the renewal should occur at the 2025 reorganization meeting.

**FINANCE COMMITTEE –** Commissioner Brewer represented the finance committee. He reported that the finance committee met to review the Fund's year-to-date performance, noting significant challenges due to claims exceeding the budget. He highlighted key drivers, such as the rise in pharmacy costs, particularly the surge in the GLP-1 usage. Commissioner Brewer stated that there is no immediate cause for alarm, the situation is being closely monitored and wanted to bring this to the attention for the groups to provide feedback to those working on the 2025 budget. He expressed that a special assessment is unlikely but anticipates no dividends this year and a potential rate adjustment to account for increased prescription costs. He mentioned that the new group has had a minor impact and the new groups performance aligns with the existing members, though it is important to keep this in mind when looking to expand the Fund. He also noted that Mr. Vozza mentioned the State increasing rates by approximately 22% for retirees and 16% for active members. While this is concerning, it is not alarming, and due to the Fund's balance and overall stability, the challenges should be manageable for this year.

<u>WELLNESS COMMITTEE –</u> Commissioner Kaufer stated the committee met to discuss about new membership, Mt. Olive and Boonton, has expressed interest in joining the wellness program and have submitted their applications. The committee is making the recommendation for them to be allowed in the wellness program for 2025, which is reflected in Resolution 24-26.

#### **PROFESSIONAL REPORTS:**

#### EXECUTIVE DIRECTOR'S REPORT

**Fast Track Financial Reports** as of May 2024 – Executive Director reviewed Financial Fast Track through May, as Commissioner Brewer explained, we are experiencing a deficit through the first five months of the year, but June claims look like they are better than the prior months. He stated that we are planning on having monthly financial committee meetings to continue to monitor the performance. Executive Director thanked Commissioner Brewer for his excellent report.

Executive Director noted that the May meeting was not the stronger performance for all professionals, particularly with areas within the agenda. He thanked the Program Manger, Attorney

and Chair for participating in discussions on how PERMA can deliver a better product for everyone. He mentioned there was a lot of work to provide a stronger performance such as having an agenda review with the Program Manager and Attorney's office. The one resolution was amended to be a recommendation award and not a contract award.

**2025 Budget Update** – Executive Director mentioned there has been a higher than usual claims experience in the first half of the year. To address this, an additional month of claims data will be included in the budget development, which should help smooth out the trends and provide the actuary with a clearer picture of the Fund's performance. He stated the budget is still on track for introduction at the September meeting, though some information, like the finance committee meeting, may be closer to the introduction date than in the past.

**Contract Reviews –** Executive Director explained the two resolutions that Commissioner Poff mentioned in the contracts committee review. The first resolution solidifying the recommendation of the contract committee for the extensions that can be awarded at the reorganization meeting and the second resolution approving the two RFP's for Program Manager and Actuary. He noted that both contract expires December 31, 2024 and will help the committee review the scope of services.

### MOTION TO APPROVE RESOLUTION 24-24 TO RECOMMEND THE EXTENSION OF PROFESSIONAL SERVICES RESOLUTIONS

MOTION:	Commissioner Poff
SECOND:	<b>Commissioner Mayers</b>
VOTE:	15 Ayes, 0 Nays

### MOTION TO APPOVE RESOLTUION 24-25 TO AUTHORIZE THE HIRING OF PROFESSIONAL SERVICES:

MOTION:	Commissioner Poff
SECOND:	Commissioner Brewer
VOTE:	15 Ayes, 0 Nays

<u>OUT OF NETWORK MEMO</u> – Executive Director noted that this memo was previously sent out to Fund Commissioners and explained that this new trend of various vendors is approaching through unions, mostly police and fire, for wellness screenings. While these services are typically wellnessdrive, an area where PERMA recognizes the importance and positive impact on employee wellness, it is important to be cautious. After the screenings, the vendor recommends additional testing and follow-up services; however, these provides are outside the Aetna network, leading to out-ofnetwork costs. Executive Director recommends that if a group is approached directly, to reach out to your risk managers and program managers to verify they are in network or provide in-network equivalent providers.

HIF COOPERATIVE PRICING SYSTEM- Executive Director mentioned that a non-MRHIF entity is

joining so our strength in numbers continue to grow. Additionally, the HIF Cooperative Pricing System is officially recognized by the State of New Jersey and in the process of getting the Medical TPA RFP's approved by the Office of State Comptroller's Office (OSC). Due to the size and length of the contract recommendations, they exceed the threshold that requires the OSC approval. Executive Director is hoping that it will approve within the next couple weeks.

<u>MRHIF-</u> Executive Director reviewed the three main action items made at the MRHIF meeting including the approval of the 2023 audit, in the final steps of awarding a contract for a Data Warehouse. He noted that this data warehouse is an electronic collection of all our data which will allow review for various claims and what is driving the Funds costs. An Executive Committee Meeting will be held in August to approve this contract. Executive Director also mentioned the one-year extension of the Level Care Scrips contract that was awarded.

<u>PCORI AND A4 SURCHARGE FEES</u> - Executive Director noted that Fund pays the PCORI fees on behalf of all our Funds which is included in the budget development. He noted that the A4 surcharge is a retiree subsidized that is only charge to school districts due to the retirees are covered by the State Health Benefits.

**IDEMNITY AND TRUST AGREEMENTS** – Executive Director stated that there are two entities with outstanding indemnity and trust agreements. Executive Director mentioned any help from brokers and community would be helpful in getting these rectified.

#### PRORAM MANAGER REPORT

Program Manager Dave Vozza reviewed the report included in the agenda.

#### TOWN VISITS/MEETINGS/PLAN CHANGE REQUESTS

Our office frequently works with towns for review of plan options for union negotiations. If anyone is entering union negotiations and needs assistance, please feel free to contact our office directly to discuss.

#### ENROLLMENT, ELIGIBILITY, BILLING

The funds policy is to limit retro corrections, including terminations to 60 days. Please check your monthly invoice for accuracy. If you find a discrepancy, please report it immediately to the NJHIF enrollment Team at <u>northernnjenrollments@permainc.com</u>

#### > Use of the WEX (formerly Benefits Express) enrollment system is mandatory.

#### **Online Enrollment System Training Schedule – 2024**

**UPDATE NOTICE FOR ALL WEX USERS:** There has been a new update to the WEX system that could affect your member termination process, where the "Quick Term" option has been removed. To

accommodate this change, we have provided updated termination instructions attached separately for your reference. Going forward, please review these instructions and follow the updated process when terminating a member. Afterward, you can access the quick look feature to confirm coverage is ending on the desired date. You can also reach out to the enrollment team if you need assistance.

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

Wednesday -	August 21st 10:00 am - 11:00 am
Wednesday -	September 18th 10:00 am - 11:00 am
Wednesday -	October 16th 10:00 am - 11:00 am
Wednesday -	November 20th 10:00 am - 11:00 am

Please email Austin Flinn at PERMA to join a training session.

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 to your email so an invite can be sent. Email: <u>HIFTraining@permainc.com</u>

I have also attached an updated enrollment team contact list for your reference.

#### DATA WAREHOUSE RFP

Our office has been working with other fund professionals in the interview and selection process for the Data Management Vendor for all funds.

#### **CLAIM TRENDS**

Our office is proactively monitoring and providing claim trends to the Executive Director's office.

#### 2025 HSA AND HDHP LIMITS

Employees will be able to sock away more money in their health savings accounts (HSAs) next year, thanks to rising inflation.

The annual limit on HSA contributions for self-only coverage in 2025 will be \$4,300, a 3.6 percent increase from the \$4,150 limit in 2024, <u>the IRS announced May 9</u>. For family coverage, the HSA contribution limit will jump to \$8,550, up 3 percent from \$8,300 in 2024.

The jump in the contribution limits is significantly less than the <u>roughly 7 percent increase seen from</u> 2023 to 2024.

Meanwhile, for 2025, a high-deductible health plan (HDHP) must have a deductible of at least \$1,650 for self-only coverage, up from \$1,600 in 2024, or \$3,300 for family coverage, up from \$3,200, the IRS

noted. Annual out-of-pocket expense maximums (deductibles, co-payments and other amounts, but not premiums) cannot exceed \$8,300 for self-only coverage in 2025, up from \$8,050 in 2024, or \$16,600 for family coverage, up from \$16,100.

#### AETNA

### North Atlantic – New Jersey-Northern – Negotiations Complete with Hackensack Meridian Health – Effective Date: July 01, 2024

Aetna has reached a new 2-year agreement with Hackensack Meridian Health (HMH) Hospitals Corporation effective July 1, 2024. As a result of this successful negotiation process, Hackensack Meridian Health (HMH) Hospitals Corporation will continue to participate in Aetna's New Jersey-Northern network.

Retraction letters have been mailed to those members who received termination letters.

Hackensack Meridian Health (HMH) Hospitals Corporation will remain in our online provider search tool and in our current printed provider directories.

#### **EXPRESS - SCRIPTS**

#### ESI FORMULARY UPDATES EFFECTIVE 7/1/2024

A copy of the updated Express-Scripts Formulary Guide is attached for your reference.

### MOTION TO APPROVE RESOLUTION 24-26 OFFERING WELLNESS MEMBERSHIP TO BOONTON AND MOUNT OLIVE

MOTION:	Commissioner Mayers
SECOND:	<b>Commissioner Brewer</b>
VOTE:	Unanimous

**TREASURER**: Fund Treasurer reviewed the June and July bills list. He noted the summary of cash transactions report, certification and reconciliation of claims and payments, and the allocation of the cash.

### MOTION TO APPROVE RESOLUTION 24-27 APPROVING THE JUNE AND JULY BILLS LIST AND TREASURERS REPORT

MOTION:	Commissioner Mayers
SECOND:	Commissioner Brewer
VOTE:	15 Ayes, 0 Nayes

**ATTORNEY REPORT**: Fund Attorney noted that Commissioner Mayers discussed this during the claims committee report and has nothing else to add.

### MOTION TO APPROVE RESOLUTION 24-28 AUTHORIZING THE SETTLEMENT AGREEMENT

MOTION:	Commissioner Poff
SECOND:	Commissioner Mayer
VOTE:	15 Ayes, 0 Nayes

Fund Attorney commented the new format is a result of extensive discussion with the Chair and a review of how other Funds operate. He stated process has helped clarify everyone's roles and improve preparedness, which has been very beneficial, and the Fund will continue in this direction and remains open to any further comments and recommendations. Additionally, he introduced Michelle Dale.

**AETNA:** Mr. Silverstein reviewed the claims for the month of April. There was one high claimant over the threshold of \$100,000 for the month of April and four high claimants for the month of May. He stated the dashboard metrics continue to perform well. Mr. Silverstein announced the negotiations with Hackensack Meridian has come to an agreement with no disruptions.

**EXPRESS SCRIPTS:** Mr. Yuk reviewed the monthly utilization tracking report for the month of May and states the trend continues to increase. He noted the next two pages provide more information on why, highlighting the GLP-1s and Pulmonary Hypertension that shows one member.

Executive Director commented that Zepbound has no data for 2023 because it was not on the market and already has climbed to the top five drugs. Commissioner Kaufer noted the new Encircle program, which Executive Director confirmed it starts in September but will not see the effect until 2025.

**DELTA DENTAL:** Ms. Ebarle reviewed the Delta Dental claims summary for the calendar year of 2023, highlighting the network discount which is 31% of the submitted claims. She mentioned that there is 97% of in network utilization resulting in reduction of paid claims.

#### **OLD BUSINESS: None.**

**NEW BUSINESS:** Executive Director introduced Caitlin Perkins, the new member of the Executive Director team.

PUBLIC COMMENT: None.

**EXECUTIVE SESSION:** 

**MOTION TO ADJOURN :** 

MOTION:	Commissioner Brewer
SECOND:	Commissioner Mayer

#### MEETING ADJOURNED AT: 10:14 am

#### NEXT MEETING: September 26, 2025 9:30 am

#### RANDOLPH MUNICIPAL BUILDING

Caitlin Perkins For

Tom Russo, Secretary

## **APPENDIX II**

North Financial Committee Meeting September 17<sup>th</sup>, 2024 8:30 AM Teams Meeting

Thomas Russo, Committee Chair Scott Heck, Fund Chair Adam Brewer, Executive Committee Mike Soccio, Executive Committee Brandon Lodics, Executive Director Emily Koval, Associate Executive Director Ray Burke, Chief HIF Underwriter John Vataha, Fund Actuary David Vozza, Program Manager Randi Gerber, Account Executive Caitlin Perkins, Account Manager

Mr. Lodics began the meeting by introducing Ray Burke, the Chief HIF Underwriter and John Vataha, the HIF Actuary, who were invited to join the financial committee meeting to provide more insight into the market trend provide details on how the claims experience impacts the development of the budget since there is a higher increase in this budget than in the past. Additionally, Mr. Lodics introduced Caitlin Perkins as the new account manager for PERMA for those committee members that were not in attendance at the last North meeting.

Mr. Lodics explain the process of how the claims budget are developed, noting there are claim triangles that has the claims incurred and paid for a time period of the past two years. These triangles are sent to Mr. Vataha, who utilizes the enrollment information, claims information to develop a Per Employee Per Month (PEPM) which is applied to the budget. As part of the legislative requirement, Mr. Vataha then certifies the budget after it's been completed and sends it to the Department of Banking and Insurance.

Mr. Vataha commented that there is reasonable check of numbers to as well, such as reviewing emerging experiences or if there are abnormalities, Mr. Vataha will collaborate with Mr. Lodics to determine if these are one-time occurrences.

Mr. Lodics reviewed the executive summary for the 2025 projected budget, noting the standalone pharmacy claims are groups that do not have the embedded RX with their medical. Mr. Lodics mentioned the Level Care Coalition which completes an annual market check to look for competitive bids against current contract to improve pricing. Additionally, Humira is being replaced on the formulary with a biosimilar, which will be more cost efficient and the Omada program will hopefully decrease the pharmacy claims. Mr. Lodics noted that MRHIF is a projection since the RFP is still out, but expecting the Fund to do a bit better than 10% that is assumed in this budget due to the improved loss ratio of the Fund. Mr. Lodics discussed the Medicare Advantage legislative impact of the Inflation Reduction Act (IRA). This Act causes the "donut hole" to be

eliminated which is causing costs to shift to the plan sponsors. He noted this dramatic increase is 90% due to the legislative, and only 10% of claims experience.

Mr. Lodics continued to review the executive summary, noting the wellness program is an estimated budget that has been provided by Brittany Vozza, which is a decrease from the previous year. Lastly, the expenses do include the reduction of a wellness coordinator since the discussion on next steps for this position is still occurring. Additionally, the expenses do include an estimated 5% increase for TPA services.

Mr. Lodics stated that overall, the share of the Fund's budget is the medical claims, pharmacy claims and Medicare Advantage legislative impact. He noted this is not inconsistent with what is being seen on the market.

Mr. Vozza began his review of the medical claims, highlighting that medical is running about 10% over trend, which seems to be some of a post COVID catch up with people starting to be more comfortable with doing elective procedures. Additionally, hospitals are looking for increases while negotiating contracts, and to keep in mind that the Atlantic Health Systems contract is up at the end of the year, which represents 40% of our hospital spend. Mr. Vozza reviewed the high-cost claimants, noting there are some increases in the overall claims but the actual cost per claim decreased. Additionally, the level of discounts decreased at a 68.8% for network discount savings and a higher level of activity in medical claims. Mr. Vozza noted that Obesity is now the number one condition in the Fund, most likely due to the GLP-1s.

In response to Commissioner Brewer, Mr. Lodics noted that it is believed this is COVID catch up and this has been a trend seen across all Funds. Mr. Vataha commented he does work in half of a dozen states and this pattern is being seen across the board and the expectation was this demand would be occurring right after COVID. He noted that providers lost capacity to provide services during COVID and there has been significant efforts to bring the capacity back, which as been taking a bit longer for professional organizations to restaff at the same capacity as pre-CVOID. He stated this trend should not go forward indefinitely.

Commissioner Brewer noted that we are analyzing the current costs of medical claims, but is there any comparison to this same data pre-COVID? Mr. Vozza noted that he can provide his information. Mr. Vataha commented that this may not all be utilization increases but the increase in unit costs. Referring back to the effort to increase capacity back to pre-COVID, health care workers have been receiving increased wages. Mr. Burke mentioned there is also an increase at the reimbursement levels.

In response to Commissioner Heck's inquiry about projecting costs over a five-year period, Mr. Burke stated the Fund reviews two years for developing the budget and for comparison reasons, we look at five years. He noted that it is important to review trends in the past years to project them moving forward.

Commissioner Heck noted that it would be helpful to be able to provide projections moving forward to see if the pharmacy jump will impact us for a couple years or if there will be a drop sooner than expected. Mr. Burke noted that there has been an increase in specialty utilization but biosimilars are making their way on the market, which will be a must more cost-efficient replacement. Mr. Vataha commented, pharmacy especially, is difficult to project since the marketplace is evolving so quickly. Commissioner Heck stated that this radical increase was not anticipated so it would be helpful to know from a bigger perspective if there are trends that we should be concerned about. Mr. Vozza noted that a large majority of drugs have generics and biosimilars but there is a strong pipeline coming to market. He stated he feels that we should expect an upward projection and Mr. Vataha agreed based on the research in the actuary community.

Mr. Lodics noted that in the budget, it is transparent the ratio of the medical to prescription cost is shifting. Mr. Vataha stated the medical trend for this Fund is in line with national trends, but the pharmacy trends is where everyone is current struggling. Mr. Burke provided insight that although there is significant costs in weight loss drugs, there could be potential downstream savings in healthcare costs later. Mr. Vataha agreed, but noted only if the employee stays in the Fund long enough, which is another layer of difficulty when projecting future pharmacy trends.

In response to Commissioner Soccio inquiry about how the new members effect the budget, Mr. Vozza stated they are slightly higher but did not add much to the overall equation. Commissioner Heck questioned if the increase was across the entire Fund, or the entities costs and Mr. Vozza clarified the increase was across the entire Fund. Commissioner Brewer noted that the bigger issue is the lag of the accumulation of the Fund balance related to the increase size of the Fund.

Mr. Vozza began to review the pharmacy claims, noting the overall plan cost is up 28.5% which started after we finalized the 2024 budget. He provided insight on the top five categories which is half of the Funds pharmacy spend. Mr. Lodics noted that Zepbound is a new market entrance for 2024, which was an unanticipated increase in cost of prescription.

Mr. Vozza reviewed the Medicare Advantage increase, stating the legislative, risk adjustment model, and changes to growth rate calculation are the three main parts of the increased rate for the 2025 projected budget. Additionally, he reviewed potential cost savings options such as negotiation pricing with UHC and Aetna, the possibility of a Medicare Advantage RFP, opportunity to change formularies and/or networks, and review current out of network reimbursement levels. Mr. Lodics summarized the out of network memo that we preciously distributed stating that other Funds did pass a resolution to put a cap on the out of network claims, which is something that this Fund can also do to protect themselves from any out of network vendors.

Commissioner Heck inquired when these options will be explored, and Mr. Vozza responded that the Medicare Advantage options have been provided but need to see the potential disruption and the resolution about capping out of network claims for varicose veins can be distributed. Mr. Vozza stated the reimbursement levels are pending from Aetna. In response to Commissioner Heck's question about the timeline of the reinsurance price, Mr. Vozza noted the RFP was just received back but there are still action items that need to be completed before finalizing the number. Mr. Lodics added that the October MRHIF meeting will introduce the budget, so by time this budget is adopted, that number will be finalized.

Commissioner Heck questioned if this final rate is a significant number and impacts the final budget, should we wait to introduce the budget until after that number is finalized? Mr. Lodics noted that this overall rate increase is a small percentage of the whole budget, stating that the claims increase is approximately 92% of the overall budget. Mr. Burke commented that the assumptions were taking into development factored the consideration. Mr. Lodics mentioned that this Fund loss ratio is performing well so assuming it will be on the lower end.

Mr. Lodics proceeded with the review of the proposed 2025 budget, focusing on the assessments. He pointed out that these reflect the actual rate impact and mentioned that the expense ratio has been slightly higher than in previous years, resulting in a tighter renewal. However, the loss ratio adjustments were not factored in since this budget. This is up to the discretion of the committee, but Mr. Lodics recommends not incorporating loss ratio adjustment this year and globalization to spread the risk but noted these decisions can be made at a later date. Mr. Lodics also mentioned that a group, Roxbury, is dental only continues to operation at a different rate than the other groups in dental, which Commissioner Brewer questioned why that would be occurring. Ms. Koval noted that they were originally in the Fund for medical and dental but removed their medical coverage within the HIF so it most likely is a catch up and Mr. Vozza confirmed this.

Mr. Lodics reviewed the five-year history of the Fund budget increases, noting the five-year average is under trend and provides a larger picture that supports the motion that this should be a one-year increase. Mr. Lodics noted that this is a more conservative approach based on some considerations for the Atlantic Health contract and what we have been seeing in the market. Additionally, Mr. Lodics noted the expenses are in line with the RFP responses that are expected to renew at the reorganization meeting and an assumed 2% increase for the professional RFP's that are currently out.

At this point, Mr. Lodics reviewed the key points of the 2025 proposed budget and requested approval to introduce this, as is, to the Executive Committee at the September meeting.

Commissioner Heck noted that he would like to see more detailed data to provide this to members that may be approaching with questions on why the increases are happening, such as a five-year operational cost, claims cost, surplus position and increase of hospital costs. He noted that he does not see another option for this budget but would like more time. Committee Chair Russo requested a ten-year chart that shows the difference between the State Health Benefits and HIF to have a graphic to compare when being questioned about this increase. Mr. Lodics noted PERMA will begin working on these, but the carriers will not share the increase of contracted negotiation rates since they consider that competitive knowledge.

Commissioner Brewer noted that there is not much more we can do with the budget this year and that provided materials with a deeper understanding of why this increase is occurring would be nice but questioned the virtue of waiting to introduce this budget. Committee Chair Russo agreed that he does not believe an atomic drop in the budget will occur if we wait. Commissioner Brewer mentioned the law allows for certain variation and if changes do occur, we can reintroduce but thinks we need to introduce this to allow groups to prepare their budgets accordingly. Commissioner Heck yielded the decision to the group.

Committee Chair Russo stated that it is important to education people that we do not expect this to be the norm and to be prepared for people comparing the HIF to the SHBP. Commissioner Brewer expanded on this, noting that he provided a notice to his senior staff and the immediate response was comparing it to the SHBP. Commissioner Soccio noted that in the HIFs, we do have control over the destiny while the SHBP, we do not.

Mr. Lodics agreed with Commissioner Soccio's point, and that this renewal is relative to the SHBP renewal. He noted that the State continues to budget on to a deficit and the intent and value of the HIFs is to have opportunities for these discussions. He noted that a lot of this is out of our control this year and Mr. Vozza provided insight that the State only used claims through 2023 whereas the HIF used claims for the first half of 2024.

Committee Chair Russo commented that the average employees care more about the premium rather than the operational backend of Fund and SHBP. He noted that he is appreciative of the professionals' opinions on the possible future savings due to GLP-1's but believes it was a little overly optimistic.

A discussion followed about new membership, which was previously discussed at the Operations Committee meeting and will be discussed at the Executive Committee meeting. Mr. Lodics noted he is working the Fund attorney on proper next steps based on the decision made at that meeting.

Mr. Lodics closed out the meeting by reviewing the cash positions handout that provides more insight on the cash flow that is occurring, noting there are Fund to pay the claims and utilizing the cash flow. He also noted the key take aways of additional reporting to support the increase and the budget will be introduced at the September meeting. Commissioners agreed with Mr. Lodics statement.

# **APPENDIX III**

#### NOJHIF Operations Committee Meeting September 11, 2024 10:00am Teams Meeting

Scott Heck, Fund Chair Adam Brewer, Committee Chair Carrine Piccolo-Kaufer, Executive Committee David Vozza, Program Manager Randi Gerber, Account Executive Brandon Lodics, Executive Director Caitlin Perkins, Account Manager

Commissioner Brewer opened the meeting by expressing concerns raised in previous discussions amount the executive committee members about the potential impact of adding new members and how it will affect the balance of the Fund. He suggested while existing offers should be honored, a temporary moratorium on admitting new members should be implemented.

Mr. Vozza noted that one group has already been approved but he will inform the three others in the pipeline about the temporary pause. Commissioner Brewer confirmed that, expect for the one approved group, membership growth will be paused and reevaluated as we move forward with budgets and an analysis of our financial stability.

Chair Heck agreed with Commissioner Brewer, stating that the priority is protect the Fund's integrity for current members, especially considering the rising prescription costs and the possibility of a challenging budget cycle ahead. Commissioner Piccolo-Kaufer agreed with the temporary pause and revaluation at a later date.

Mr. Lodics acknowledged the work Dave has done in communicating with entities and brokers and has offered to reach out to the three pending groups as well. He also confirmed that this decision will be documented in the Executive Director's report and meeting minutes.

Mr. Vozza noted that the Chair and Executive Director might receive communications from these brokers and groups after they are notified. Chair Heck agrees that there may be some push back, but the main goal is to protect the Fund.

Mr. Lodics added that some groups may inquire about applying to other funds during this process. Commissioner Brewer pointed out that it's not the role of the Executive Committee or the Executive Director to offer advice in such cases. Chair Heck agreed, reaffirming that the focus should remain on protecting the Fund rather than providing external guidance.

# **APPENDIX IV**

#### NOJHIF Wellness Committee Meeting September 4, 2024 10:00am Teams Meeting

Carrine Piccolo-Kaufer, Committee Chair Mike Sondermeyer, Executive Committee Greg Poff, Executive Committee Brittany Vozza, Vozza Agency Caitlin Perkins, PERMA

Committee Chair Piccolo-Kaufer opened the meeting to discuss the current standing with vendor Atlantic Health. She stated that the increase of the costs of the program is something to be conscious of while the Fund is facing challenges with the next budget year.

Ms. Vozza provided some insight into her conversations with Atlantic Health. She noted she is collaborating with them to get some screenings available while helping keep the Per participant cost down, especially for the older groups. She noted that for 2025, the estimated total number of 516 participants, including two new groups. Although the budget is 14% higher, there is potential for 45 new participants. Ms. Vozza suggested to cut costs, we could avoid using Lifeline screenings for only new groups to ensure they receive proper screenings and for older groups transition over to more cost friendly options such as nutritional counseling.

Committee Chair Piccolo-Kaufer confirmed that the Lifeline screenings are the most expensive and inquired when the contract with Lifeline ends. Ms. Vozza responded that the contract ends in 2025 and the price per screening is currently \$299. While these screenings are valuable, it is important to balance costs without compromising services for new members.

Ms. Vozza mentioned a new foot screening that Atlantic Health is offering, explaining this screening could identify issues such as pre-diabetes, circulation, and balance problems. This is particularly beneficial for police and DPW workers who wear specific boots for a long period of time that can have an overall impact on health. The screening can provide recommendations on exercises and inserts to purchase. Ms. Vozza noted this is a different type of screening and worth considering since it is often difficult to get an appointment with a podiatrist, but the cost remains a factor.

Committee Chair Piccolo-Kaufer referred to past discussions about the future of this program, particularly the high cost and redundancy of screenings. She stated one issue are those employees who do not return, they lose access to these benefits but it makes sense to provide valuable services such as the Lifeline screenings to new groups to establish a health baseline. After this baseline is establish, encouraging members to take ownership of their health and continue education in preventative measures and wellness seminars. She mentioned the state plan does not offer on-site screenings.

In response to Ms. Vozza's comment about the growth of the Fund, Committee Chair Piccolo-Kaufer mentioned phasing in new members by providing educational opportunities and work with ambassadors to help build up their own programs and fully integrate the new members in 2026.

Commissioner Poff noted that the recasting the budget would be a hardship given the challenges anticipated for 2025 and suggested as a potential solution to do a soft rollout where participants can use inexpensive resources. Ms. Vozza mentioned a possible incentive to increase participation and Committee Chair Piccolo-Kaufer mentioned that a larger incentive may not be justified if the program isn't fully utilized.

Ms. Vozza questioned if there should be a limitation or policy for new members to try and help control the need to increase the budget. Committee Chair commented this is a possibility but would have to be directed by the financial committee. She mentioned that all vendors are continuing to increase their costs and discussed the possibility of Atlantic Health presenting something that will not be as quite robust and to work with them to develop something in the future. Ms. Vozza agreed that all vendor costs are increasing and mentioned next year will be a big RFP year. She noted that with Atlantic Health we can add an amendment for additional services and it would not extend their current contract. This would avoid the RFP process but still provide the option to add the foot screening. Ms. Vozza did mention that this would have to be approved through the contracts and executive committee level at the recommendation of the wellness level.

Commissioner Poff stated to engage employees, a cycle of different screenings over five years may help maintain interest and reduce redundancy. This potential solution may be a cost-efficient solution while focusing on cost-efficiency.

Committee Chair Piccolo-Kaufer stated that it is important to keep the members engaged and present in the building so there is value in the program. Commissioner Sondermeyer suggested an option for voluntary type screenings for a shared cost to increase participation while reducing the financial burden.

Commissioner Poff agreed it is important to understand the budget before making final decisions and coming up with creative solutions if there are parameters. Ms. Vozza noted that the current contract will get us through this next year then we can focus on cost-efficient solutions to encourage wellness to the members and provide on-site screenings. She also mentioned the consideration of town dividends, and how some of the newer towns have not accumulated a dividend yet so they may not be able to offset the Fund portion of the incentive.

Committee Chair Piccolo-Kaufer suggested that the new groups should receive the Lifelong screenings, unless if the financial committee states that we cannot offer that. If that is the case, she mentioned the wellness committee will work with the financial committee to find a cost-effective solution to determine the best route to take moving forward. She also suggested to get the foot screenings to be approved by the executive committee but recommended holding off until after the budget is introduced. Ms. Vozza noted that it will be best to get another call together before we recommend the new screenings approval. The majority agreed that another call should be scheduled for early November.