SouthernSkylands

AGENDA JULY 9, 2024 9:30 AM

SOMERSET COUNTY 20 GROVE ST - 2ND FLOOR ENGINEERING ROOM SOMERVILLE, NJ 08876

OPEN PUBLIC MEETINGS ACT - STATEMENT OF COMPLIANCE

In accordance with the Open Public Meetings Act, notice of this meeting was given by:

- I. Advertising the notice in the Courier News;
- II. Filing advance written notice of this meeting with the Commissioners of the Southern Skyland Regional Health Insurance Fund; and
- III. Posting notice on the Public Bulletin Board of the Office of the County Clerk

SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND AGENDA

OPEN PUBLIC MEETING:

July 9, 2024 9:30 AM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

ROLL CALL OF THE 2024 EXECUTIVE COMMITTEE

Colleen Mahr, Chair
Brian Auger, Secretary
Adam Beder, Executive Committee Member
Dan Hayes, Executive Committee Member
Anthony Ferrera, Executive Committee Member

APPROVAL OF MINUTES - May 14, 2024 Open Public Meeting (Appendix I)

REPORTS:

EXECUTIVE DIRECTOR (PERMA)	
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PUBLIC COMMENT	
SCHEDULE NEXT MEETING -September 11, 2024	

MEETING ADJOURNMENT

SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND EXECUTIVE COMMITTEE MEETING JULY 9, 2024 9:30 AM

FINANCIAL REPORTS - COMMISSION AND HEALTH INSURANCE FUND

- 1. Skylands Fund Financial Fast Track as of April 30, 2024 (page 4)
- **2. Ratios Report -** as of April 30, 2024 (page 5)

SHARED SERVICES ARRANGEMENT-QUALIFIED PURCHASING AGENT (QPA)

The Skylands HIF has some large contract RFPs coming up this fall. The County is recommending the Fund enter into a shared services agreement with their QPA, Melissa Kosensky to oversee the process at no additional fee.

Resolution 19-24 approves the Shared Services Agreement and Resolution 20-24 authorizes the QPA to Oversee and issue previously approved RFPs: Medical Third-Party and Medicare Advantage.

HEALTH INSURANCE COOPERATIVE PRICING SYSTEM

At the May meeting the Skylands HIF passed a resolution to join the Health Insurance Cooperative Pricing System, a Co-op with other like entities in the State. The Skylands leadership has reconsidered and feels it is best that the Fund remain independent.

Resolution 21-24 is included in your agenda, rescinds the resolution to join.

HEALTH CENTER - INTEGRITY CONTRACT

The Health Center contract between the Fund and Integrity Health have an additional one year extension. Although the Executive Committee took action to RFP, the County is recommending the Fund exercise that extension into 2025.

Resolution 21-24 extends this contract one additional year, effective January 1, 2025 at the same terms and conditions.

PCORI AND A4 SURCHARGE FEES

The PCORI is an independent, nonprofit research organization that seeks to empower patients and others with actionable information about their health and healthcare choices.

As part of the Affordable Care Act (ACA) group health plans are required to pay an annual fee, which is a certain dollar amount per enrollee contributing to the PCORI effort. The fee is considered in the Fund's budget development and paid by the PERMA Accounting team on behalf of all our medical groups. This fee will be paid in July.

In addition, all School Board members that are not in the State Health Benefits Fund are surcharged for retiree benefits. The Fund has one School Board that the Fund will pay this fee in July on its behalf, which was included in its rates upon joining the Fund.

		SOUTHER		IONAL HEALTH IN AST TRACK REPORT		
			AS OF	April 30, 2024		
			THIS	YTD	PRIOR	FUND
			MONTH	CHANGE	YEAR END	BALANCE
LINI	DEDWIDITING INC	ONAE	4 552 906	10 257 554	262 252 622	200 610 107
-	DERWRITING INC IM EXPENSES	OIVIE	4,552,896	18,357,554	262,252,633	280,610,187
CLAI	Paid Claims		4,438,381	14,440,181	214,781,777	229,221,958
	IBNR		120,502	611,619	3,103,390	3,715,00
	Less Specific Exces	ςς.	-	(238,865)	(3,839,101)	(4,077,96
	Less Aggregate Ex		-	-	-	(4,077,50
TOT	TAL CLAIMS		4,558,883	14,812,936	214,046,065	228,859,001
	NSES		4,330,003	14,012,550	214,040,003	220,033,003
	MA & HMO Premiu	ıms	224,290	785,789	8,118,576	8,904,36
	Excess Premiums		172,452	684,740	12,134,440	12,819,17
	Administrative		474,904	1,831,782	22,866,871	24,698,65
TOT	TAL EXPENSES		871,646	3,302,311	43,119,886	46,422,197
	DERWRITING PROFIT	//1 (1-2-2)	(877,632)	242.308	5,086,681	5,328,98
	ESTMENT INCOME	(LO33) (1-2-3)	24,336	91,973	358,463	450,43
	DEND INCOME			-	338,403	430,43
		SS) (A.F.G)	(853,296)	334,280	5,445,144	5,779,424
SIA	TUTORY PROFIT/(LO	33) (4+5+6)	(055,290)	334,200	3,443,144	5,775,424
DIVI	DEND		-	-	-	-
Tran	sferred Surplus IN		_	_		_
	•	_				
	nsferred Surplus OUT		- (272.222)	-		
SIA	TUTORY SURPLU	5 (7-8+9)	(853,296)	334,280	5,445,144	5,779,424
			SURPLUS (DEFIC	ITS) BY FUND YEAR		
Close	ed	Surplus	(209)	7,810	(394,288)	(386,47
		Cash	(209)	7,810	(394,288)	(386,47
2022	2	Surplus	(17,398)	25,963	4,989,773	5,015,73
		Cash	13,459	56,820	4,921,999	4,978,81
2023	3	Surplus	(52,496)	(161,846)	849,659	687,81
		Cash	(143,108)	(1,873,984)	2,770,761	896,77
2024	4	Surplus	(783,193)	462,353		462,35
		Cash	(313,681)	(404,872)		(404,87
OTAL	SURPLUS (DEFICI	TS)	(853,296)	334,280	5,445,144	5,779,424
OTAL	CASH		(443,540)	(2,214,226)	7,298,472	5,084,246
			111	IS BY FUND YEAR		, ,
TOT	AL CLOSED YEAR CLA	AIMS	209	(7,810)	150,780,926	150,773,11
FUN	D YEAR 2022					
	Paid Claims		32,867	36,972	29,116,325	29,153,29
			-	-		-
	IBNR					-
	Less Specific Exces		-	-	-	
	Less Specific Exces Less Aggregate Ex		-	-	-	-
	Less Specific Exces Less Aggregate Ex AL FY 2022 CLAIMS		32,867	36,972	29,116,325	- 29,153,29
	Less Specific Exces Less Aggregate Ex AL FY 2022 CLAIMS D YEAR 2023		32,867	36,972	29,116,325	
	Less Specific Exces Less Aggregate Ex AL FY 2022 CLAIMS D YEAR 2023 Paid Claims		32,867 150,190	36,972 3,268,294	29,116,325 31,045,424	34,313,71
	Less Specific Exces Less Aggregate Ex AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR	cess	32,867	36,972 3,268,294 (2,824,085)	29,116,325	34,313,71 279,30
	Less Specific Exces Less Aggregate Ex AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Exces	cess	150,190 (93,102)	36,972 3,268,294	29,116,325 31,045,424	34,313,71 279,30
FUN	Less Specific Exces Less Aggregate Ex AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Ex	cess	150,190 (93,102)	36,972 3,268,294 (2,824,085) (233,577)	29,116,325 31,045,424 3,103,390 - -	34,313,71 279,30 (233,57
TOTA	Less Specific Exces Less Aggregate Ex AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Ex AL FY 2023 CLAIMS	cess	150,190 (93,102)	36,972 3,268,294 (2,824,085)	29,116,325 31,045,424 3,103,390	34,313,71 279,30 (233,57
TOTA	Less Specific Exces Less Aggregate Ex AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Ex AL FY 2023 CLAIMS D YEAR 2024	cess	- 32,867 150,190 (93,102) - - 57,088	36,972 3,268,294 (2,824,085) (233,577) - 210,632	29,116,325 31,045,424 3,103,390 - -	34,313,71 279,30 (233,57 - 34,359,44
TOTA	Less Specific Exces Less Aggregate Ex AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Ex AL FY 2023 CLAIMS D YEAR 2024 Paid Claims	cess	- 32,867 150,190 (93,102) - - 57,088 4,255,114	36,972 3,268,294 (2,824,085) (233,577) - 210,632 11,137,438	29,116,325 31,045,424 3,103,390 - -	34,313,71 279,30 (233,57 - 34,359,44 11,137,43
TOTA	Less Specific Exces Less Aggregate Ex AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Ex AL FY 2023 CLAIMS D YEAR 2024 Paid Claims IBNR	cess	- 32,867 150,190 (93,102) - - 57,088	36,972 3,268,294 (2,824,085) (233,577) - 210,632	29,116,325 31,045,424 3,103,390 - -	34,313,71 279,30 (233,57 - 34,359,44 11,137,43
TOTA	Less Specific Exces Less Aggregate Ex AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Ex AL FY 2023 CLAIMS D YEAR 2024 Paid Claims IBNR Less Specific Exces	cess	- 32,867 150,190 (93,102) 	36,972 3,268,294 (2,824,085) (233,577) - 210,632 11,137,438	29,116,325 31,045,424 3,103,390 - -	34,313,71 279,30 (233,57 - 34,359,44 11,137,43
TOTA	Less Specific Exces Less Aggregate Ex AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Ex AL FY 2023 CLAIMS D YEAR 2024 Paid Claims IBNR Less Specific Exces Less Aggregate Ex	cess	- 32,867 150,190 (93,102) 	36,972 3,268,294 (2,824,085) (233,577) - 210,632 11,137,438 3,435,704	29,116,325 31,045,424 3,103,390 - -	34,313,71 279,30 (233,57 - 34,359,44 11,137,43 3,435,70
TOTA	Less Specific Exces Less Aggregate Ex AL FY 2022 CLAIMS D YEAR 2023 Paid Claims IBNR Less Specific Exces Less Aggregate Ex AL FY 2023 CLAIMS D YEAR 2024 Paid Claims IBNR Less Specific Exces	cess	- 32,867 150,190 (93,102) 	36,972 3,268,294 (2,824,085) (233,577) - 210,632 11,137,438	29,116,325 31,045,424 3,103,390 - -	29,153,29; 34,313,71; 279,30; (233,57; - 34,359,44; 11,137,43; 3,435,70; - 14,573,14;

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.

SOUTHERN SKYLAND REGIONAL HIF

CONSOLIDATED BALANCE SHEET

AS OF APRIL 30, 2024

BY FUND YEAR

ASSETS Cash & Cash Equivalents Assesstments Receivable (Prepaid) Interest Receivable	(404,872) 2,975,165 - -	896,777 110,292 -	4,978,819 -	(386,478)	
Assesstments Receivable (Prepaid)	, ,	110,292	4,978,819	(386,478)	
Assesstments Receivable (Prepaid)	2,975,165 - -	-	-	-	2 005 455
Interest Receivable	-	-			3,085,457
Titterest Receivable	-		-	-	-
Specific Excess Receivable		103,027	-	-	103,027
Aggregate Excess Receivable	-	-	-	-	-
Dividend Reœivable	-	-	-	-	-
Prepaid Admin Fees	2,417	-	-	-	2,417
Other Assets	1,648,706	(43,637)	36,917	-	1,641,986
Total Assets	4,221,416	1,066,459	5,015,737	(386,478)	9,917,133
LIABILITIES					
Accounts Payable	-	-	-	-	-
IBNR Reserve	3,435,704	279,305	-	_	3,715,009
A4 Retiree Surcharge	10,413	20,003	-	-	30,416
Dividends Payable	-	-	-	-	-
Accrued/Other Liabilities	312,946	79,338	-	-	392,284
Total Liabilities	3,759,063	378,646	-	-	4,137,709
EQUITY					
Surplus / (Defiat)	462,353	687,813	5,015,737	(386,478)	5,779,424
Total Equity	462,353	687,813	5,015,737	(386,478)	5,779,424
Total Liabilities & Equity	4,221,416	1,066,459	5,015,737	(386,478)	9,917,133
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.

SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND									
RATIOS									
					FY20)24			
INDICES	2023		JAN	FEB			MAR		APR
Cash Position	7,298,472		4,767,153		4,979,609		5,527,786		5,084,246
IBNR	3,103,390	\$	3,248,924	_	3,478,206	_	3,594,507	_	3,715,009
Assets	8,835,598	\$	10,088,683		9,526,540		10,412,913		9,917,133
Liabilities	3,390,454	\$	3,917,867	_	3,653,220		3,780,192	_	4,137,709
Surplus	5,445,144	\$	6,170,815	\$	5,873,320	\$	6,632,721	\$	5,779,424
Claims Paid Month	2,444,346	\$	2,871,259	\$	3,896,394	\$	3,234,147	\$	4,438,381
Claims Budget Month	2,957,373	\$	3,776,673	\$	3,765,900	\$	3,671,016	\$	3,750,837
Claims Paid YTD	33,876,852	\$	2,871,259	\$	6,767,653	\$	10,001,800	\$	14,440,181
Claims Budget YTD	34,654,637	\$	3,776,673	\$	7,542,573	\$	11,213,589	\$	14,964,426
RATIOS									
Cash Position to Claims Paid	2.99		1.66		1.28		1.71		1.15
Claims Paid to Claims Budget Month	0.83		0.76		1.03		0.88		1.18
Claims Paid to Claims Budget YTD	0.98		0.76		0.90		0.9		1.0
Cash Position to IBNR	2.35		1.47		1.43		1.54		1.37
Assets to Liabilities	2.61		2.58		2.61		2.75		2.4
Surplus as Months of Claims	1.84		1.63		1.56		1.81		1.54
IBNR to Claims Budget Month	1.05		0.86		0.92		0.98		0.99

SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND

2024 Budget Status Report

as of April 30, 2024

us of ripr	1 20, 202 1				
			YTD	\$ Variance	% Varaiance
YTD Budgeted	Annual	Latest Filed	Expensed		
11,705,069	34,219,381	26,160,618	11,268,944	436,125	4%
4,292,953	12,611,806	10,511,270	, ,		
(1,033,596)	(3,100,787)	(3,100,787)			
3,259,357	9,511,019	7,410,483	3,304,198	(44,840)	-1%
14,964,426	43,730,400	33,571,101	14,573,142	391,285	3%
99,517	443,879	0			
246,681	756,068	648,715			
346,198	1,199,947	648,715	343,541	2,657	1%
404,495	1,211,096	1,206,406	442,248	(37,753)	-9%
244,408	717,273	607,740	202,279	42,128	17%
65,333	196,000	196,000	78,988	(13,655)	
958,776	2,876,328	2,312,314	908,430	50,346	5%
1,268,517	3,789,601	3,116,054	1,189,697	78,820	6%
681,232	2,003,154	1,518,982	684,740	(3,508)	-1%
17,664,868	51,934,198	40,061,258	17,233,367	431,501	2%
40,575	121,724	444,012	-	40,575	100%
3,333	10,000	10,000	3,333	(0)	0%
181,793	543,694	428,743	221,546	(929)	-1%
38,824	116,112	93,408	Included Above	in Executive Dia	rector Fee
277,474	810,770	662,085	279,004	(1,531)	-1%
4,833	14,500	8,364	4,833	(0)	
			· ·	-	0%
		127,723		-	0%
25,000	75,000	75,000	25,000	-	0%
626,682	1,873,271	1,420,990	629,141	(2,460)	0%
3,469	10,407	10,407	11,999	(8,530)	-246%
13,333	40,000	40,000	13,333	(0)	
1,000	3,000	3,000	1,000	-	0%
10,413	15,483	31,634	10,413	(1)	
3,667	11,000	11,000	3,667	(0)	
31,881	79,890	96,041	40,413	(8,531)	-27%
658,563	1,953,161	1,517,031	669,554	(10,991)	-2%
18,364,005	54,009,083	42,022,301	17,902,920	461,085	3%
	YTD Budgeted 11,705,069 4,292,953 (1,033,596) 3,259,357 14,964,426 99,517 246,681 346,198 404,495 244,408 65,333 958,776 1,268,517 681,232 17,664,868 40,575 33,333 181,793 38,824 277,474 4,833 5,120 90,304 25,000 626,682 3,469 13,333 1,000 10,413 3,667 31,881	YTD Budgeted Annual 11,705,069 34,219,381 4,292,953 12,611,806 (1,033,596) (3,100,787) 3,259,357 9,511,019 14,964,426 43,730,400 99,517 443,879 246,681 756,068 346,198 1,199,947 404,495 1,211,096 244,408 717,273 65,333 196,000 958,776 2,876,328 1,268,517 3,789,601 681,232 2,003,154 17,664,868 51,934,198 40,575 121,724 3,333 10,000 181,793 543,694 38,824 116,112 277,474 810,770 4,833 14,500 5,120 15,360 90,304 287,834 25,000 75,000 626,682 1,873,271 3,469 10,407 13,333 40,000 1,000 3,000 10,413 15,483 3,667 11,000 31,881 79,890 658,563 1,953,161	YTD Budgeted	YTD Budgeted Annual Latest Filed Expensed 11,705,069 34,219,381 26,160,618 11,268,944 4,292,953 12,611,806 10,511,270 (1,033,596) (3,100,787) (3,100,787) (3,100,787) 3,259,357 9,511,019 7,410,483 3,304,198 14,964,426 43,730,400 33,571,101 14,573,142 99,517 443,879 0 0 246,681 756,068 648,715 343,541 404,495 1,211,096 1,206,406 442,248 244,408 717,273 607,740 202,279 65,333 196,000 196,000 78,988 958,776 2,876,328 2,312,314 908,430 1,268,517 3,789,601 3,116,054 1,189,697 681,232 2,003,154 1,518,982 684,740 17,664,868 51,934,198 40,061,258 17,233,367 40,575 121,724 444,012 - 38,824 116,112 93,408 Included Above 2	YTD Budgeted Annual Latest Filed Expensed 11,705,069 34,219,381 26,160,618 11,268,944 436,125 4,292,953 12,611,806 10,511,270 (1,033,596) (3,100,787) (3,100,787) (3,100,787) (3,100,787) (3,100,787) (3,100,787) (3,100,787) (3,100,787) (3,100,787) (44,840) 14,964,426 43,730,400 33,571,101 14,573,142 391,285 99,517 443,879 0 0 2246,681 756,068 648,715 343,541 2,657 404,495 1,211,096 1,206,406 442,248 (37,753) 244,408 717,273 607,740 202,279 42,128 65,333 196,000 78,988 (13,655) 958,776 2,876,328 2,312,314 908,430 50,466 1,268,517 3,789,601 3,116,054 1,189,697 78,820 681,232 2,003,154 1,518,982 684,740 (3,508) 17,664,868 51,934,198 40,061,258 17,233,367

RESOLUTION NO. 19-24

RESOLUTION AUTHORIZING A SHARED SERVICES AGREEMENT BETWEEN THE COUNTY OF SOMERSET AND THE SOUTHERN SKYLANDS REGIONAL HEALTH INSURANCE FUND FOR THE SERVICES OF THE SOMERSET COUNTY QUALIFIED PURCHASING AGENT

WHEREAS, the County of Somerset (the "County") and the Southern Skylands Regional Health Insurance Fund (the "SSRHIF") desire to enter into a Shared Services Agreement for the purpose of sharing the services of the County's Qualified Purchasing Agent for a period of one year from the date hereof at no cost to SSRHIF; and

WHEREAS, pursuant to N.J.S.A. 40A:65-1, et seq., public contracting units in the State of New Jersey may enter into shared services agreements for any services or circumstances which will result in the reduction of local expenses; and

WHEREAS, the County employs a Qualified Purchasing Agent ("QPA"), and the SSRHIF has need of the services of a QPA; and

WHEREAS, the County has determined that it is in the best interests of the public to share the services of the Somerset County QPA with SSRHIF as needed from time to time;

NOW, THEREFORE, BE IT RESOLVED that the Somerset County Board of County Commissioners does hereby authorize the Director to execute a Shared Services Agreement between the County of Somerset and the Southern Skylands Regional Health Insurance Fund in substantially the form annexed hereto as "Exhibit A," and further authorizes the Clerk of this Board to attest said execution and affix thereto the corporate seal of the County of Somerset.

ADOPTED	: July 9, 2024	
BY:		-
	CHAIRPERSON	
ATTEST: _		
	SECRETARY	

RESOLUTION NO. 20-24

SOUTHERN SKYLANDS REGIONAL HEALTH INSURANCE FUND RESOLUTION AUTHORIZING A SHARED SERVICES AGREEMENT WITH SOMERSET COUNTY FOR THE SERVICES OF THE SOMERSET COUNTY QUALIFIED PURCHASING AGENT AND THE ISSUANCE OF A REQUEST FOR PROPOSALS FOR SERVICES

WHEREAS, the County of Somerset and the Southern Skylands Regional Health Insurance Fund ("SSRHIF") desire to enter into a Shared Services Agreement in substantially the form annexed hereto as "Exhibit A," to share the services of the Somerset County Qualified Purchasing Agent ("QPA") for a period of one year from the date hereof at no cost to SSRHIF; and

WHEREAS, by Resolution 17-24, the SSRHIF Board of Fund Commissioners authorized the procurement of the services of Medical Third-Party Administrator and Medicare Advantage Provider services through a fair and open process in accordance with the Local Public Contracting Law, N.J.S.A. 40A:11-1 et seq.; and

WHEREAS, the QPA is qualified to prepare, issue and evaluate responses to a request for proposals for Medical Third-Party Administrator and Medicare Advantage Provider services for the SSRHIF;

NOW, THEREFORE, BE IT RESOLVED that the Chairman is hereby authorized to execute the Shared Services Agreement and such other documents as are necessary to share the services of the Somerset County QPA and staff, and for the QPA to prepare, issue and evaluate responses to a request for proposals for Medical Third-Party Administrator and Medicare Advantage Provider services for the SSRHIF.

SOUTHERN SKYLANDS REGIONAL HEALTH INSURANCE FUND

ADOPTED	: July 9, 2024	
BY:		
D1	CHAIRPERSON	-
ATTEST: _	SECRETARY	

RESOLUTION NO. 21-24

SOUTHERN SKYLANDS REGIONAL HEALTH INSURANCE FUND RESOLUTION RESCINDING RESOLUTION 16-24 AUTHORIZING PARTICIPATION IN THE HEALTH INSURANCE COOPERATIVE PRICING SYSTEM AND THE EXECUTION OF A COOPERATIVE PRICING AGREEMENT

WHEREAS, by Resolution 16-24, the Executive Committee of the Southern Skylands Regional Health Insurance Fund previously authorized participation in the Health Insurance Cooperative Pricing System and to permit the Chairman to enter into a Cooperative Pricing Agreement with the Southern New Jersey Regional Employee Benefits Fund; and

WHEREAS, the Executive Committee has reconsidered the matter and determined not to participate in the Health Insurance Cooperative Pricing System; and

WHEREAS, the Executive Committee desires to rescind Resolution 16-24;

NOW, THEREFORE, BE IT RESOLVED that Resolution 16-24 authorizing participation in the Health Insurance Cooperative Pricing System and authorizing the Chairman to enter into a Cooperative Pricing Agreement with the Southern New Jersey Regional Employee Benefits Fund is hereby rescinded.

BE IT FURTHER RESOLVED that this Resolution shall take effect immediately upon passage.

SOUTHERN SKYLANDS REGIONAL HEALTH INSURANCE FUND

ADOPTED	: July 9, 2024	
BY:		
	CHAIRPERSON	
ATTEST: _		
	SECRETARY	

RESOLUTION NO. 22-24

SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND APPOINTING INTEGRITY HEALTH AS THE ADMINISTRATOR OF THE FUND HEALTH CENTER

FOR FUND YEAR 2025 AS AN OPTION TO EXTEND THE CONTRACT FOR ONE ADDITIONAL PERIOD

WHEREAS, the Southern Skyland Regional Health Insurance Fund places the public trust above all else and remains steadfast in its commitment to the highest ethical standards in the conduct of its business on behalf of the taxpayers of Somerset County; and

WHEREAS, the Executive Committee adopted Bylaws which establish the procedures for obtaining qualifications and/or proposals for professional services contracts; and

WHEREAS, said Bylaws further provide that, the Commissioners shall meet and select persons to serve in certain professional positions, including an Administrator for the health center facitiy and

WHEREAS, Request for Qualifications/Request for Proposals from qualified firms were solicited and received and reviewed as provided for by statute; and

WHEREAS, the Fund desires to retain the services and enter into a second year option of an agreement attached hereto for the respective services and the amounts as designated for the year 2024. There is one option to extend the agreement for a one-year period remaining.

Name Services Amount

Integrity Health Health Center Administrator \$27.50 per employee per month

WHEREAS, all facility expenses will be reimbursed through the Fund to Integrity Health, which varies on a monthly basis;

WHEREAS, the designated professional has offered to provide the needed specialized services, which constitute "professional services" as defined in the Local Public Contracts Law, N.J.S.A. 40A:11-1 et seq. (the "Law") for amount as set forth above; and

WHEREAS, funds are anticipated to be available in the 2025 temporary and permanent budgets and these contracts are further subject to certification of funds; and

WHEREAS, the proper accounts will be charged and funds encumbered prior to services being provided, contingent upon appropriation of sufficient funds for this purpose; now, therefore, be it

RESOLVED, by the Southern Skyland Regional Health Insurance Fund that the attached Agreement with the Health Center Administrator is hereby authorized for the period January 1, 2025 through December 31, 2025; with an option to extend for another one year period and, be it

FURTHER RESOLVED, that all Agreements approved hereunder have been awarded pursuant to a fair and open process and as professional services under N.J.S.A. 40A:11-5(1) (a); and, be it

FURTHER RESOLVED, that the Chairperson is hereby authorized to execute and deliver the attached Agreements in accordance with the Rules and Regulations of the Southern Skyland Regional Health Insurance Fund; and, be it

FURTHER RESOLVED, that a copy of this action shall be printed once in the designated newspaper within ten (10) days of its passage as required by law.

 $\bf ADOPTED$ by THE SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND at a properly noticed meeting held on July 9, 2024

BY:		_
	CHAIRPERSON	
ATTEST: _		
	SECRETARY	

ADOPTED: July 9, 2024

Southern Skyland Regional HIF Program Manager

July 2024

Program Manager: PERMA Risk Management Services LLC Online Enrollment Training: kkidd@permainc.com Enrollments: somersetcountyinscom@permainc.com Fax: 856-266-9469

ELIGIBILTY/ENROLLMENT

Please direct any eligibility, enrollment, or system related questions to our dedicated Southern Skyland Regional HIF team. To contact the team, email somersetcountyinscom@permainc.com or fax to 856-266-9469

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

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

COVERAGE UPDATES: None

EXPRESS SCRIPTS UPDATE:

SaveOn Updated Listing Effective 7/1/24

ESI's updated SaveOn list effective 7/1/24 has been released. Drugs highlighted in green are new drugs effective 7/1/24. The drugs highlighted in red are excluded effective 7/1/24. Southern Skylands had no members impacted by the removal of SaveOn drugs. The updated listing has been sent to brokers.

Notice of Creditable Coverage (NOCC)

CMS Annual Open Enrollment period for the 2025 plan year is October 15 – December 7. ESI has begun gathering information needed for their annual mailing campaign for the 2025 Notice of Creditable Coverage (NOCC). To meet the CMS requirement, Express Scripts will mail the NOCC letters the week of September 16th to those age 65 and older enrolled in ESI coverage through the HIFs. The Program Manager team has provided ESI with an updated letter template for the new plan year in preparation of the mailing.

GLP-1 Weight Loss Program (Encircle) Recommendation Effective 9/1/24

The Program Manager has consulted with the MRHIF Pharmacy Benefit Manager (PBM) Express Scripts (ESI) in determining a program to assist with the increasing cost of GLP-1 medications being

used for weight loss. The Encircle Program encompasses the criteria recommended for the drugs intended use; lifestyle modification, member engagement, overall adherence. As a result, the Program Manager is recommending the Encircle Program for Southern Skyland Regional HIF participants who are approved for weight loss medications using the following criteria:

- BMI > 32 **OR**
- BMI between $27 \le 32$ WITH 2 or more documented comorbidities

In addition to receiving an approved prior authorization (PA), below are 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 programmed to the member's ESI active account prior to delivery. The scale will record each weigh-in and will update the member's file automatically. Members must weighin a minimum of 4 times a month
- Members must engage with an assigned online Omada coach via a mobile application or web browser a minimum of 4 times a month

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

Members who have a current PA on file will be grandfathered until their PA on file has expired with ESI. Upon renewal of their PA they will be need to meet the above BMI requirements to be considered for approval. If approved, they will receive the Omada welcome kit and will need to adhere to the Encircle program requirements as outlined.

Communications will be sent to all impacted members with registration information. Once registered members will receive an access code to sign up for the Omada welcome kit.

OPERATIONAL UPDATES:

2024 PCORI Fees - Due July 31, 2024

Form 720 Reporting – Plan sponsors of applicable self-insured health plans are responsible for reporting and paying the PCORI annual fee by filing Form 720, Quarterly Federal Excise Tax Return. The Form 720 is due on July 31 of the year following the last day of the plan year.

The HIFs will handle the submission of the form and payment for all groups with medical coverage in the HIFs.

2024 LEGISLATIVE REVIEW: None

Medical and Rx Reporting: None

No Surprise Billing and Transparency Act- Continued Delays

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

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

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

- Issuing updated ID Cards with additional out of pocket information
- Providing transparency in coverage machine-readable files
- Providing price comparison tools
- Healthcare providers should work with insurance carriers to provide potential patients with good faith estimates of costs

2023 Specialized Audits

As approved through an RFP through the Program Manager's contract, the HIFs has acquired the services of AIM to conduct specialized audits for the Southern Skyland Regional HIF. AIM will complete medical claims audits for claims administered by Aetna. The claim audit being performed will determine Aetna's claim processing and financial accuracy of medical claims. AIM will also perform an Operation Review. Aim will perform an in-depth evaluation of the controls employed by the Aetna to ensure quality administration. **See Appendix.**

Carrier Appeals:

Submission	Appeal	Appeal	Reason	Determination	Determination
Date	Type/Carrier	Number			Date
05/02/2024	Medical/Aetna	SSRHIF 2024	Anesthesia	Upheld	05/02/2024
		05 01			

IRO Submissions: None



TO: Executive Committee –Southern Skyland Regional Health Insurance Fund

DATE: May 14, 2024

Re: SSRHIF 2024 Prospect Report

New Members:

• Manville-Passed resolution to join April 1, 2024; had a Broker change which pushed effective date from 2/1 to 4/1.

Potential Opportunities:

- Hackettstown Broker working with Town to request claims from the State.
- <u>Hunterdon County Considering looking for 1/1.</u>
- Bridgewater Twp Considering looking for 1/1.
- East Amwell Received actuarial approval.

SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND BILLS LIST

JUNE 2024

Resolution No.

	WHEREAS, the Treasurer has cert	ified that funding is available to pay the following bills:	
		yland Regional Health Insurance Fund hereby authorizes the trants in payment of the following claims; and	
	FURTHER, that this authorization sha	all be made a permanent part of the records of the Fund.	
TUND YEAR CLO	<u>OSED</u>		
<u>CheckNumber</u> V06240	<u>VendorName</u>	Comment	<u>InvoiceAmount</u>
V06240	INTEGRITY HEALTH	2021 PERFORMANCE GUARANTEE PAYOUT	72,000.00 72,000.00
		Total Payments FY CLOSED	72,000.00
FUND YEAR 2022 CheckNumber	<u>VendorName</u>	Comment	<u>InvoiceAmount</u>
V06241 V06241	INTEGRITY HEALTH, LLC	2022 PERFORM ANCE GUARANTEE PAYOUT	81,600.00 81,600.00
		Total Payments FY 2022	81,600.00
FUND YEAR 2024 CheckNumber	<u>4</u> <u>VendorName</u>	Comment	InvoiceAmount
V06243 V06243	INTEGRITY HEALTH, LLC	HEALTH CARE EXPENSE- FACILITY 05/24	268,412.85 268,412.85
		Total Payments FY 2024	268,412.85
		TOTAL ACH	422,012.85
		TOTAL PAYMENTS ALL FUND YEARS	422,012.85
	Chairperson		
	Attest:		
		Dated:	
	I hereby certify the availability of sufficient unence	umbered funds in the proper accounts to fully pay the above claims.	
		Treasurer	

SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND SUPPLEMENTAL BILLS LIST

Resolution No. _____ JUNE 2024

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

BE IT RESOLVED that the Southern Skyland Regional Health Insurance Fund 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

CheckNumber 001584	VendorName	Comment	<u>InvoiceAmount</u>
001584	AETNA HEALTH MANAGEMENT, LLC	MEDICARE ADVANTAGE 06/24	42,650.28 42,650.28
001585			42,020120
001585	HORIZON BLUE CROSS BLUE SHIELD OF NJ	COUNTY-A# 731345395-304469824 6/3/24	95,208.88
001585	HORIZON BLUE CROSS BLUE SHIELD OF NJ	LIBRARY# 273954962-304469498 6/3/24	9,244.11
001585	HORIZON BLUE CROSS BLUE SHIELD OF NJ	LIBRARY-488920617- INV 304469659 6/3/24	429.52
001585	HORIZON BLUE CROSS BLUE SHIELD OF NJ	271255463-BOSS- INV 304423049 5/14/24	13,605.82
			118,488.33
001586			
001586	PERMA RISK MANAGEMENT SERVICES	POSTAGE 05/24	108.86
001586	PERMA RISK MANAGEMENT SERVICES	ENROLLMENT FEE 06/24	9,752.00
001586	PERMA RISK MANAGEMENT SERVICES	PROGRAM MANAGER 06/24	27,915.10
001586	PERMA RISK MANAGEMENT SERVICES	ADMIN FEES 06/24	17,748.64
_			55,524.60
001587			
001587	ASSUREDPARTNERS CAPITAL, INC	CONSULTANT FEE 06/24	4,385.01
			4,385.01
001588 001588	A CONTROL MAD A DESCRIPTION OF THE CONTROL OF THE C	CONCLUENT ANTE PERFORMAN	2 402 07
001588	ACRISURE NJ PARTNERS INS. SERVICES LLC	CONSULTANT FEES 06/24	2,482.87
001589			2,482.87
001589	RSC INSURANCE BROKERAGE INC	CONSULTANT FEE 06/24	2,384.78
001389	RSC INSURANCE BROKERAGE INC	CONSULTANT FEE 00/24	2,384.78
001590			2,304.70
001590	FAIRVIEW INSURANCE AGENCY ASSOCIATES INC	CONSULTANT FEES 06/24	2,771.29
001370	THE VIEW INDOMINEE FIGURE FRISDOCITIES INC	CONSCETATOR PLES 00/21	2,771.29
001591			_,,,,,,,,
001591	GANNETT NEW YORK NJ LOCALIQ	A#1120753 INV 6435257-10207192-5/26/24	90.35
			90.35
001592			
001592	CONNER STRONG & BUCKELEW	SELECTIVE- SURETY-PUB. OFF. 5/24-5/25	2,210.00
			2,210.00
001593			
001593	SOMERSET COUNTY VOCATIONAL & TECHNICAL SCHOOLS	REIMB FOR WELL. LUNCH/TRAINING 03/24	930.00
_			930.00
001594			
001594	SOM ERVILLE URBAN RENEWAL LLC	MONTHLY RENT 06/24	19,747.00
			19,747.00
		CHECK TOTALS	251,664.51

W06244 W06244	UNITED (MEDICARE ADVANTAGE)	MEDICARE ADVANTAGE 06/24	64,929.14 64,929.14
W06245 W06245	AETNA	TPA FEES 06/24	67,231.33 67,231.33
W06246 W06246	CONNER STRONG & BUCKELEW	MARKETING MGR FEES 06/24	6,250.00 6,250.00
W06247 W06247	INTEGRITY HEALTH, LLC	BEBETTER W/O COACH. 2.2024	850.00 850.00
W06248 W06248	INTEGRITY HEALTH, LLC	BEBETTER W/O COACH. 4.2024	850.00 850.00
W06249 W06249	INTEGRITY HEALTH, LLC	BEBETTER W/O COACH. 5.2024	850.00 850.00
W0624A W0624A	CAPITAL BENEFITS LLC	CONSULTANT FEES 06/24	4,166.19 4,166.19
W0624B W0624B	CONNER STRONG & BUCKELEW	CSB CONSULTING FEE 06/24	8,544.71 8,544.71
W0624C W0624C	HCC LIFE INSURANCE COMPANY	SPECIFIC REINSURANCE 06/24	77,270.28 77,270.28
W0624D W0624D	INTEGRITY HEALTH, LLC	HEALTH MGMT FEE 05/24	51,041.15 51,041.15
		ACH/WIRE TOTALS	281,982.80
		Total Payments FY 2024	533,647.31
		TOTAL PAYMENTS ALL FUND YEARS	533,647.31
	Chairperson		
	Attest:		
	I hereby certify the availability of sufficient unencur	Dated: mbered funds in the proper accounts to fully pay the above claims.	
		Treasurer	

SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND SUPPLEMENTAL BILLS LIST

		JUNE 2024
WHEREAS, the Treasurer h	has certified that funding is available to pay the following bills:	
FURTHER, that this authoriza	tion shall be made a permanent part of the records of the Fund.	
VendorName	Comment	InvoiceAmount
MERCADIEN	2023 FINAL AUDIT INV 221081 5/24	5,777.00 5,777.00
	Total Payments FY 2023	5,777.00
	TOTAL PAYMENTS ALL FUND YEARS	5,777.00
Chairperson		
Attest:		
ereby certify the availability of sufficient	Dated: t unencumbered funds in the proper accounts to fully pay the above claims.	
	Treasurer	
	BE IT RESOLVED that the South Fund Treasurer to is: FURTHER, that this authorizant VendorName MERCADIEN Chairperson Attest:	Total Payments FY 2023 TOTAL PAYMENTS ALL FUND YEARS Chairperson Attest: Dated: ereby certify the availability of sufficient unencumbered funds in the proper accounts to fully pay the above claims.

SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND BILLS LIST

Resolution No			JULY 2024
	WHEREAS, the Treasurer has cert	ified that funding is available to pay the following bills:	
		yland Regional Health Insurance Fund hereby authorizes the rants in payment of the following claims; and	
	FURTHER, that this authorization sha	ll be made a permanent part of the records of the Fund.	
FUND YEAR 2024 CheckNumber	VendorName	Comment	<u>InvoiceAmount</u>
W07240 W07240	INTEGRITY HEALTH, LLC	HEALTH CARE EXPENSE- FACILITY 06/24	198,907.25 198,907.25
		Total Payments FY 2024	198,907,25
		TOTAL PAYMENTS ALL FUND YEARS	198,907.25
	Chairperson		
	Attest:		
		Dated:	
1	nereby certify the availability of sufficient unencu	imbered funds in the proper accounts to fully pay the above claims	•
		Treasurer	
		11casuici	

SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED

Current Fund Year:	2024									
Month Ending:	April									
	Medical	PHC Rx		Reinsurance	Dental	Cont.	Admin	Closed Year	TO TAL	
OPEN BALANCE	4,754,200.63	(283,832.32)	(222,751.26)	(273,670.69)	(71,737.99)	34,930.03	1,976,916.22	(386,269.07)	5,527,785.55	
RECEIPTS										
Assessments	3,098,363.30	326,900.88	818,620.00	167,491.31	0.00	10,441.96	256,327.63	0.00	4,678,145.08	
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Invest Pymnts	14,932.65	851.68	2,223.93	0.00	691.67	97.86	5,538.02	0.00	24,335.81	
Invest Adj	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Subtotal Invest	14,932.65	851.68	2,223.93	0.00	691.67	97.86	5,538.02	0.00	24,335.81	
Other *	39,539.15	0.00	160,165.07	0.00	11,381.59	0.00	30,857.24	0.00	241,943.05	
TOTAL	3,152,835.10	327,752.56	981,009.00	167,491.31	12,073.26	10,539.82	292,722.89	0.00	4,944,423.94	
EXPENSES										
Claims Transfers	3,343,002.29	0.00	1,407,704.45	0.00	0.00	0.00	0.00	209.26	4,750,916.00	
Expenses	124,244.46	70,085.50	0.00	172,451.84	100,045.48	0.00	170,220.22	0.00	637,047.50	
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
TOTAL	3,467,246.75	70,085.50	1,407,704.45	172,451.84	100,045.48	0.00	170,220.22	209.26	5,387,963.50	
END BALANCE	4,439,788.98	(26,165.26)	(649,446.71)	(278,631.22)	(159,710.21)	45,469.85	2,099,418.89	(386,478.33)	5,084,245.99	

		CERTIF			IION OF CLAIMS				
			SOUTHERN	N SKYLAND RI	EGIONAL HEALTH	I INSURANCE F	UND	I	I
Month		April							
Current I	und Year	2024							
Current		2021							
		1.	2.	3.	4.	5.	6.	7.	8.
		Calc. Net	Monthly	Monthly	Calc. Net	TPA Net	Variance	Delinquent	Change
Policy		Paid Thru	Net Paid	Recoveries	Paid Thru	Paid Thru	То Ве	Unreconciled	This
Year	Coverage	Last Month	April	April	April	April	Reconciled	Variance From	Month
2024	Medical	5,073,060.08	3,159,944.67	0.00	8,233,004.75	0.00	8,233,004.75	5,073,060.08	3,159,944.67
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	2,823,440.13	1,407,704.45	0.00	4,231,144.58	0.00	4,231,144.58	2,823,440.13	1,407,704.45
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	7,896,500.21	4,567,649.12	0.00	12,464,149.33	0.00	12,464,149.33	7,896,500.21	4,567,649.12
2023	Medical	2,582,177.16	150,190.35	0.00	2,732,367.51	0.00	2,732,367.51	2,582,177.16	150,190.35
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Rx	557,149.17	0.00	0.00	557,149.17	0.00	557,149.17	557,149.17	0.00
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	3,139,326.33	150,190.35	0.00	3,289,516.68	0.00	3,289,516.68	3,139,326.33	150,190.35
2022	Medical	4,104.60	32,867.27	0.00	36,971.87	0.00	36,971.87	4,104.60	32,867.27
	Dental	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
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Total	4,104.60	32,867.27	0.00	36.971.87	0.00	36,971.87	4,104.60	32,867.27
Closed Yea	Closed Year	(2,731.44)		0.00	(2,522.18)		(2,522.18)		209.26
C105CG 1 Ca	21030tt Total	(2,731.44)	207.20	0.00	(2,322.10)	5.00	(2,322.10)	(2,731.77)	207.20
	Total	(2,731.44)	209.26	0.00	(2,522.18)	0.00	(2,522.18)	(2,731.44)	209.26
	TOTAL	11,037,199.70	4,750,916.00	0.00	15,788,115.70	0.00	15,788,115.70	11,037,199.70	4,750,916.00

SO	UTHERN SKYLAND REGIONAL H	EALTH INSURAN	CEFUND
ΑL	L FUND YEARS COMBINED		
cι	URRENT MO NTH	April	
cι	URRENT FUND YEAR	2024	
		Description:	Investors Bank
		ID Number:	
		Maturity (Yrs)	
		Purchase Yield:	0.7
		TO TAL for All	
	Acc	ts & instruments	
Op	ening Cash & Investment Balance	\$5,527,785.55	5527785.55
op	ening Interest Accrual Balance	\$0.00	(
1	Interest Accrued and/or Interest Cost	\$0.00	\$0.00
2	Interest Accrued - discounted Instr.s	\$0.00	\$0.00
3	(Amortization and/or Interest Cost)	\$0.00	\$0.00
4	Accretion	\$0.00	\$0.00
5	Interest Paid - Cash Instr.s	\$24,335.80	\$24,335.80
6	Interest Paid - Term Instr.s	\$0.00	\$0.00
7	Realized Gain (Loss)	\$0.00	\$0.00
8	Net Investment Income	\$24,335.80	\$24,335.80
9	Deposits - Purchases	\$5,206,160.77	\$5,206,160.77
10	(Withdrawals - Sales)	-\$5,674,036.08	-\$5,674,036.08
			ok
En	ding Cash & Investment Balance	\$5,084,246.04	\$5,084,246.04
En	ding Interest Accrual Balance	\$0.00	\$0.00
Plu	s Outstanding Checks	\$262,840.65	\$262,840.65
(Le	ess Deposits in Transit)	\$0.00	\$0.00
`			

RESOLUTION NO. 23-24

SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND APPROVAL OF THE JUNE AND JULY 2024 BILLS LIST

WHEREAS, the Southern Skyland Regional Health Insurance Fund held a Public Meeting on June 9, 2024 for the purposes of conducting the official business of the Fund; and

WHEREAS, The Treasurer for the Fund presented bills lists to satisfy outstanding costs incurred for operating the Fund during the month of June and July 2024 for consideration and approval of the Executive Committee and

WHEREAS, a quorum of the Commissioners was present thereby conforming with the Policies and Procedures of the Fund to conduct official business of the Fund,

NOW THEREFORE BE IT RESOLVED the of the Southern Skyland Regional Health Insurance Fund hereby approve the Bills List for June and July 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 Insurance Funds.

ADOPTED: July 9, 2024	
BY:	
CHAIRPERSON	
ATTEST:	
CECDETA DV	
SECRETARY	



Southern Skylands Regional Partnership Health Centers Utilization Report

Date	
05-May'24	~

PHC Services							Specialized Service						
Category	01_Sul	scriber	02_De	pendent	Total		Service	01_Sub	scriber	02 Depe	endent	Total	
	M	YTD (CY)	М	YTD (CY)	M	YTD (CY)	Service	M	YTD (CY)		YTD (CY)	М	YTD (CY
Borough of Manville		1				1	<u> </u>		, ,				
Borough of Peapack and Gladstone	2	10		7	2	17	Behavioral Health	19	93	9	52	28	14
Borough of Somerville	7	39	8	24	15	63	Care Coordination	153	605	45	200	198	80
County of Somerset	972	4,387	356	1,682	1,328	6,069	Chiropractic	35	161	8	24	43	18
Somerset County Library	66	331	43	192	109	523	COVID19 Test	5	72	3	39	8	11
Somerset County Park Commission	113	564	33	128	146	692	COVID19 Vaccine		6		1		
Somerset County Vocational & Technical School	30	217	21	113	51	330	Flu Shot		6		5		1
Township of Hillsborough	22	53	5	15	27	68	Lab	61	345	20	120	81	46
Total	1,212	5,602	466	2,161	1,678	7,763	Member Services	77	301	18	78	95	37
PHC Patients							Pharmacy	551	2,553	226	1,085	777	3,63
-nc ratients							Physical Therapy	69	271	21	66	90	33
Category	01_Su	oscriber		endent T									
	M	YTD (CY)	M Y	TD (CY) N	1 Y	TD (CY)	Physician or Nurse	229	1,101	105	447	334	1,54
Borough of Manville		1				1	Physician or Nurse Telemedicine		6		2		
Borough of Peapack and Gladstone	2	2		1	2	3	Telemedicine BH	4	15	5	15	9	3
Borough of Somerville	1	3	2	2	3	5	Telephone	2	32	3	16	5	4
County of Somerset	336	578	143	271	479	847	Xray	7	35	3	11	10	4
Somerset County Library	28	56	18	30	46	85	Total	1,212	5,602	466	2,161	1,678	7,76
Somerset County Park Commission	41	75	14	37	55	111							
Somerset County Vocational & Technical School	12	31	12	21	24	52							
Township of Hillsborough	4	8	1	5	5	13							
Total	424	752	190	366	614	1,114							
Medications Dispensed													
Category	01 Sub	scriber	02 De	pendent	Total		_						
,	M	YTD (CY)		YTD (CY)	M	YTD (CY)							
County of Somerset	575	2,925	251	1,261	826	4,186							
Somerset County Library	48	261	26	121	74	382							
Somerset County Park Commission	81	447	19	91	100	538							
Somerset County Vocational & Technical School	18	111	17	80	35	191							
Township of Hillsborough	11	20	3	12	14	32							
Total	733	3,764	316	1,565	1,049	5,329							



SOUTHERN SKYLANDS EMPLOYEE BENEFITS FUND

Monthly Claim Activity Report

July 9, 2024



	MEDICAL CLAIMS			MEDICAL CLAIMS		
	PAID 2023	# OF EES	PER EE	PAID 2024	# OF EES	PER EE
JANUARY	\$2,157,934	1,483	\$ 1,455	\$2,556,321	1,875	\$ 1,363
FEBRUARY	\$2,068,209	1,490	\$ 1,388	\$2,630,046	1,871	\$ 1,406
MARCH	\$2,019,589	1,488	\$ 1,357	\$2,512,679	1,840	\$ 1,366
APRIL	\$2,088,755	1,494	\$ 1,398	\$3,949,236	1,879	\$ 2,102
MAY	\$2,621,911	1,498	\$ 1,750	\$2,808,627	1,854	\$ 1,515
JUNE	\$2,201,035	1,499	\$ 1,468			
JULY	\$1,978,342	1,534	\$ 1,290			
AUGUST	\$2,896,771	1,566	\$ 1,850			
SEPTEMBER	\$2,150,117	1,562	\$ 1,377			
OCTOBER	\$3,009,861	1,556	\$ 1,934			
NOVEMBER	\$2,582,222	1,563	\$ 1,652			
DECEMBER	\$1,947,928	1,574	\$ 1,238			
TOTALS	\$27,722,673			\$14,456,908		
				2024 Average	1,864	\$1,550
				2023 Average	1,526	\$1,513

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

Plan Sponsor Unique ID: All

Customer: A

Group / Control: 00115332 - SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE

Paid Dates: Service Dates: 04/01/2024 - 04/30/2024 01/01/2011 - 04/30/2024

Line of Business: All

Paid Amt

\$118,528.65

Total: \$118,528.65

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

Plan Sponsor Unique ID : All

Customer: All

Group / Control: 00115332 - SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE

Paid Dates: Service Dates: 05/01/2024 - 05/31/2024 05/01/2024 - 05/31/2024

Line of Business: All

Paid Amt

\$210,941.52

\$178,800.03

Total: \$389,741.55





Medical Claims Paid Per Member: January 2024 - May 2024

Total Medical Paid per EE: \$1,550

Network Discounts

59.8% Inpatient: Ambulatory: 66.5% Physician/Other: 64.0% TOTAL: 64.0%

Provider Network

% Admissions In-Network: 96.2% % Physician Office: 95.6%

Aetna Book of Business:

Admissions 97.5%; Physician 91.7%

Top Facilities Utilized (by total Medical Spend)

- RWJUH Somerset
- Hunterdon Medical Center
- · RWJUH New Brunswick
- Morristown Medical
- · St. Peters University Hospital

Catastrophic Claim Impact (Jan 2024 thru May 2024)

Number of Claims Over \$50,000: 51 Claimants per 1000 members: 12.4 Avg. Paid per Claimant: \$97.413 Percent of Total Paid: 34.3% Aetna BOB- HCC account for an

average of 45.0% of total Medical Cost

Aetna One Choice Member Outreach: Thru May 2024

Total Members Identified: 947 Members Targeted for 1:1 Nurse

Support: 290

Members Targeted for Digital Activity:

Members Targeted for Group

Coaching: 172

Member 1:1 outreach completed:

Member 1:1 Outreach in Progress: 16

Service Center Performance Goal Metrics YTD 2024

Customer Service Performance

1st Call Resolution: 94.03% 0.79% Abandonment Rate: Avg. Speed of Answer: 27.2 sec

Claims Performance

98.25%* Financial Accuracy:

*Q4 2023

90% processed w/in: 6.8 days 95% processed w/in: 11.7 days ************

Claims Performance (Monthly)

(April 2024)

90% processed w/in: 6.6 days 95% processed w/in: 10.3 days (Note: This is not a PG metric) ************

Performance Goals

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

Financial Accuracy: 99%

Turnaround Time

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



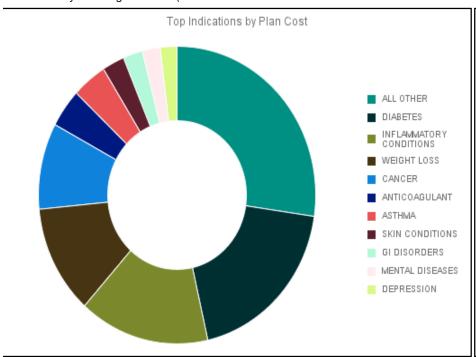
Southern Skylands Regional Health Insurance Fund

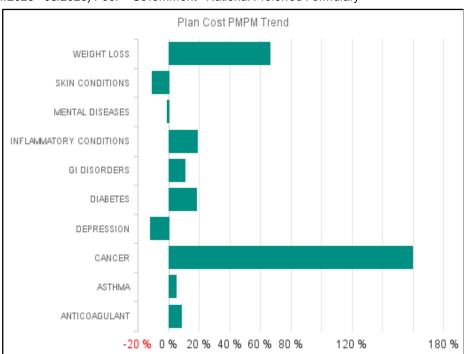
Total Component/ Date of Service (Month)	2023 01	2023 02	2023 03	2023 Q1	2023 04	2023 05	2023 06	2023 Q2	2023 07	2023 08	2023 09	2023 Q3	2023 10	2023 11	2023 12	2023 Q4	2023 YTD
Membership	3,752	3,732	3,744	3,743	3,761	3,782	3,793	3,779	3,855	3,968	3,947	3,923	3,922	3,923	3,928	3,924	3,842
Total Days	209,145	187,059	222,952	619,156	197,620	212,028	217,802	627,450	201,983	221,486	207,096	630,565	222,483	209,476	213,464	645,423	2,522,594
Total Patients	1,718	1,650	1,786	2,523	1,673	1,718	1,695	2,472	1,701	1,767	1,743	2,584	1,821	1,788	1,832	2,660	3,430
Total Plan Cost	\$750,784	\$740,468	\$935,196	\$2,426,448	\$759,726	\$874,280	\$938,186	\$2,572,193	\$883,039	\$967,155	\$1,035,410	\$2,885,603	\$910,806	\$956,827	\$1,045,360	\$2,912,994	\$10,797,238
Generic Fill Rate (GFR) - Total	80.7%	81.5%	81.9%	81.4%	82.8%	82.9%	82.8%	82.8%	82.6%	83.1%	79.1%	81.6%	78.4%	80.7%	81.5%	80.2%	81.5%
Plan Cost PMPM	\$200.10	\$198.41	\$249.79	\$216.11	\$202.00	\$231.17	\$247.35	\$226.90	\$229.06	\$243.74	\$262.33	\$245.17	\$232.23	\$243.90	\$266.13	\$247.43	\$234.18
Total Specialty Plan Cost	\$259,959	\$244,917	\$334,103	\$838,978	\$268,950	\$307,689	\$307,741	\$884,380	\$333,419	\$357,771	\$400,490	\$1,091,679	\$296,377	\$347,845	\$402,106	\$1,046,328	\$3,861,366
Specialty %of Total Specialty Plan Cost	34.6%	33.1%	35.7%	34.6%	35.4%	35.2%	32.8%	34.4%	37.8%	37.0%	38.7%	37.8%	32.5%	36.4%	38.5%	35.9%	35.8%
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	4,628	4,602	4,552	4,594	4,671	4,623	2024 00	2024 02	2024 07	2024 00	2024 09	2024 00	2024 10	2024 11	2024 12	2024 Q4	2024 110
Total Days	263,550	239,696	244,751	747,997	249,983	250,607											
Total Patients	2,093	1,990	1,994	3,019	2,034	2,099											
Total Plan Cost	\$1,063,988	\$1,146,803	\$1,133,181	\$3,343,972	\$1,154,348	\$1,267,380											
Generic Fill Rate (GFR) - Total	83.9%	83.1%	83.1%	83.4%	83.1%	82.8%											
Plan Cost PMPM	\$229.90	\$249.20	\$248.94	\$242.63	\$247.13	\$274.15											
%Change Plan Cost PMPM	14.9%	25.6%	-0.3%	12.3%	22.3%	18.6%											
Total Specialty Plan Cost	\$351,753	\$422,926	\$396,073	\$1,170,752	\$431,411	\$442,787											
Specialty %of Total Specialty Plan Cost	33.1%	36.9%	35.0%	35.0%	37.4%	34.9%											

	PM PM
1Q23	\$216.11
1024	\$242.63
Trend - 3 Q2 2 - 3 Q2 3	12.3%

Top Indications

Southern Skyland Regional Hlth (Current Period 01/2024 - 05/2024 vs. Previous Period 01/2023 - 05/2023) Peer = Government - National Preferred Formulary





	Current Period Previous Period						Trend								
Rank	Peer Rank	Indication	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Plan Cost PMPM
1	1	DIABETES	26.3 %	4,082	\$1,105,153	\$47.89	35.2 %	26.1 %	28.6 %	3,337	\$761,518	\$40.57	37.5 %	29.1 %	18.1 %
2	2	INFLAMMATORY CONDITIONS	20.9 %	345	\$877,594	\$38.03	48.1 %	34.9 %	22.5 %	288	\$600,021	\$31.97	61.8 %	39.6 %	19.0 %
3	4	WEIGHT LOSS	16.3 %	648	\$683,655	\$29.63	4.0 %	5.6 %	12.5 %	295	\$333,827	\$17.78	2.7 %	10.6 %	66.6 %
4	3	CANCER	12.9 %	177	\$540,863	\$23.44	76.3 %	76.6 %	6.4 %	131	\$169,249	\$9.02	92.4 %	77.9 %	159.9 %
5	7	ANTICOAGULANT	5.7 %	572	\$241,296	\$10.46	18.2 %	19.4 %	6.8 %	493	\$180,781	\$9.63	24.9 %	22.1 %	8.6 %
6	6	ASTHMA	5.6 %	1,491	\$234,296	\$10.15	72.1 %	87.9 %	6.8 %	1,323	\$182,063	\$9.70	67.5 %	79.1 %	4.7 %
7	5	SKIN CONDITIONS	3.6 %	499	\$149,914	\$6.50	86.4 %	86.0 %	5.1 %	350	\$136,308	\$7.26	80.9 %	88.0 %	-10.5 %
8	8	GI DISORDERS	3.1 %	244	\$131,243	\$5.69	50.8 %	56.8 %	3.6 %	205	\$96,586	\$5.15	47.8 %	59.5 %	10.5 %
9	9	MENTAL DISEASES	2.9 %	379	\$120,719	\$5.23	77.0 %	84.7 %	3.7 %	262	\$98,947	\$5.27	70.6 %	85.0 %	-0.8 %
10	10	DEPRESSION	2.7 %	3,285	\$113,455	\$4.92	96.1 %	98.5 %	3.9 %	2,594	\$104,530	\$5.57	95.4 %	98.7 %	-11.7 %
		Total Top 10		11,722	\$4,198,188	\$181.93	59.3 %	64.7 %		9,278	\$2,663,829	\$141.91	60.5 %	66.3 %	28.2 %

Top Drugs

Southern Skyland Regional Hlth (Current Period 01/2024 - 05/2024 vs. Previous Period 01/2023 - 05/2023) Peer = Government - National Preferred Formulary

						Curr	ent Period		Previous Period				Trend
Rank	Peer Rank	Brand Name	Indication	Specialty Drug	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Plan Cost PMPM
1	12	WEGOVY	WEIGHT LOSS	N	351	103	\$436,221	\$18.90	229	73	\$287,256	\$15.30	23.5 %
2	1	OZEMPIC	DIABETES	N	315	71	\$275,660	\$11.95	201	46	\$164,931	\$8.79	36.0 %
3	17	ZEPBOUND	WEIGHT LOSS	N	246	77	\$239,134	\$10.36	NA	NA	NA	NA	NA
4	3	MOUNJARO	DIABETES	N	186	47	\$181,934	\$7.88	33	7	\$31,059	\$1.65	376.5 %
5	24	ELIQUIS	ANTICOAGULANT	N	346	79	\$179,116	\$7.76	259	56	\$118,163	\$6.29	23.3 %
6	4	HUMIRA(CF) PEN	INFLAMMATORY CONDITIONS	Υ	22	5	\$142,663	\$6.18	11	2	\$87,333	\$4.65	32.9 %
7	50	REVLIMID	CANCER	Υ	11	3	\$131,364	\$5.69	NA	NA	NA	NA	NA
8	19	FARXIGA	DIABETES	N	211	49	\$109,564	\$4.75	165	34	\$83,261	\$4.44	7.0 %
9	120	POMALYST	CANCER	Υ	5	1	\$108,326	\$4.69	NA	NA	NA	NA	NA
10	26	ENBREL SURECLICK	INFLAMMATORY CONDITIONS	Υ	19	4	\$94,802	\$4.11	10	3	\$47,194	\$2.51	63.4 %
11	10	JA RDIA NCE	DIABETES	N	172	39	\$94,044	\$4.08	130	27	\$68,800	\$3.67	11.2 %
12	6	STELARA	INFLAMMATORY CONDITIONS	Υ	12	4	\$86,565	\$3.75	11	3	\$91,604	\$4.88	-23.1 %
13	15	TREMFYA	INFLAMMATORY CONDITIONS	Υ	16	3	\$80,329	\$3.48	10	2	\$45,642	\$2.43	43.2 %
14	107	ABIRATERONE ACETATE	CANCER	Υ	10	2	\$78,579	\$3.41	5	1	\$39,261	\$2.09	62.8 %
15	29	TALTZ AUTOINJECTOR	INFLAMMATORY CONDITIONS	Υ	15	4	\$71,671	\$3.11	16	4	\$72,812	\$3.88	-19.9 %
16	13	DUPIXENT PEN	SKIN CONDITIONS	Υ	21	4	\$69,221	\$3.00	17	5	\$43,192	\$2.30	30.4 %
17	64	XOLAIR	ASTHMA	Υ	43	5	\$68,135	\$2.95	44	6	\$65,987	\$3.52	-16.0 %
18	27	RINVOQ	INFLAMMATORY CONDITIONS	Υ	14	4	\$65,631	\$2.84	10	2	\$43,323	\$2.31	23.2 %
19	132	NUCALA	ASTHMA	Υ	9	2	\$61,811	\$2.68	4	1	\$28,971	\$1.54	73.5 %
20	178	SPRAVATO	DEPRESSION	Υ	50	2	\$59,566	\$2.58	43	1	\$47,560	\$2.53	1.9 %
21	81	REXULTI	MENTAL DISEASES	N	43	11	\$58,373	\$2.53	41	11	\$50,151	\$2.67	-5.3 %
22	43	XARELTO	ANTICOAGULANT	N	113	24	\$56,616	\$2.45	111	25	\$52,290	\$2.79	-11.9 %
23	34	RYBELSUS	DIABETES	N	64	14	\$56,560	\$2.45	19	4	\$16,070	\$0.86	186.3 %
24	45	JANUVIA	DIABETES	N	111	24	\$56,048	\$2.43	119	24	\$57,743	\$3.08	-21.0 %
25	73	SKYRIZI ON-BODY	INFLAMMATORY CONDITIONS	Υ	6	2	\$49,786	\$2.16	NA	NA	NA	NA	NA
			Tot	al Top 25	2,411		\$2,911,716	\$126.18	1,488		\$1,542,603	\$82.18	53.5 %

APPENDIX I

SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND OPEN PUBLIC MEETING MAY 14, 2024 9:30 AM SOMERSET COUNTY

Meeting called to order by Fund Chair. The Open Public Meeting Notice was read into record.

ROLL CALL OF 2024 EXECUTIVE COMMITTEE:

Colleen Mahr	Somerset County	Fund Chair	Present
Brian Auger	Somerset Library	Fund Sectary	Present
Dan Hayes	Somerset Parks	Executive Committee Member	Present
Adam Beder	Somerset Vo Tech	Executive Committee Member	Present
Anthony Ferrera	Hillsborough	Executive Committee Member	Present

FUND PROFESSIONALS PRESENT:

Executive Director PERMA Risk Management Services

Emily Koval Brandon Lodics

Program Manager Conner Strong & Buckelew

Crystal Bailey Peter Mina

Fund Attorney Shain Schaffer

Joel Shain

Fund Treasurer Yvonne Childress

Aetna Jason Silverstein

Express Scripts Hiteksha Patel

Fund Actuary

Integrity Health Lily Lazroe

Fund Auditor

ALSO PRESENT:

Frank Covelli, World Insurance John Lajewski, Conner Strong & Buckelew Raelene Sipple, Somerset Vo Tech Joseph Graham, Fairview Deanna Rivera, Library Theresa Rippalege, Somerset County Arge Mardakis, Somerset County Bonnie Lacamera, Somerset County Janine Erickson, Somerset County Parks Karen Gilbert, Raritan Twp Melissa Kosensky, County QPA Kevin Sluka, Somerville

The attendees introduced themselves.

MOTION TO APPROVE THE OPEN MINUTES OF MARCH 12, 2024:

MOTION: Commissioner Auger SECOND: Commissioner Hayes

VOTE: 4 Ayes, 0 Nays, 1 Abstain (Commissioner Beder)

CORRESPONDENCE: None.

EXECUTIVE DIRECTOR'S REPORT

FINANCIAL REPORTS – Executive Director reviewed the financials through February which showed a mild loss which is expected for the new member the Fund gained in January. Luckily, preliminary results from March show a positive month. Executive Director said she is not concerned and there could be stop loss claimants that are reaching the specific limit and the true ESI rebates are also not reflected.. Overall 1.5 months of surplus.

2023 SOUTHERN SKYLANDS REGIONAL HEALTH INSURANCE FUND AUDIT - The Fund Auditor, Mercadian has completed the 2023 internal audit of the Southern Skylands Regional Health Insurance Fund. The full audit will be distributed prior to the meeting, along with a summary presentation. Matt and Digesh from Mercadian will be on the call to present their findings. There are no comments or recommendations. We ask for a motion to accept the Audit and file with the State. Resolution 13-24 is included on page 9 and affidavit should be signed by all present commissioners for State filing.

Executive Director turned the meeting to Fund Auditor. Fund Auditor distributed the audit and an audit presentation for review. The opinion of this audit was clean and not modified. Thanked the administration for keeping it clean. No findings in operations. Mr. Hammel reviewed the financial highlights which showed an increase in loss reserves. There is one management recommendation which was to ensure that the renewals for the indemnity and trust agreements are received within 90 and there were some that were late. He said this was just to stay in line with the regulations. There is no opine on IBNR.

In response to Commissioner Beder, Executive Director said that subsequently, Fund Year 2023 did result in a positive ending bottom line, according to the Financial Fast Track in the agenda.

MOTION TO APPROVE RESOLUTION 13-24 ACCEPTING THE 2023 AUDIT AND FILE WITH THE STATE:

MOTION: Commissioner Auger SECOND: Commissioner Beder

VOTE: 5 Ayes, 0 Nays

Once this audit is filed, PERMA recommends the closure of Fund Year 2022. All IBNR has been expensed and there are no outstanding accounts receivable or payable.

MOTION TO APPROVE RESOLUTION 14-24 CLOSING FUND YEAR 2022.

MOTION: Commissioner Auger SECOND: Commissioner Hayes

VOTE: 5 Ayes, 0 Nays

PAYMENT OF PERFORMANCE GUARENTEE - As part of the Health Center administrator's contract, Integrity Health has submitted Performance Guarantee payments for 2021 and 2022 contracts. Details of the metrics, which are calculated from the 2019 Fund Year performance are included on page 12 with the resolution. The results are as follows:

2021: 60% Performance Reached = \$72,000 2022: 68% Performance Reached = \$81,600

Resolution 15-24 approves payments from closed year for 2021 and Fund Year 2022.

PERMA will work with the treasurer to initiate payment after this approval.

MOTION TO APPROVE RESOLUTION 15-24 APPROVING PERFORMANCE GUARENTEES.

MOTION: Commissioner Auger SECOND: Commissioner Beder VOTE: 5 Ayes, 0 Nays

HEATLH CENTER RFP- The Health Center contract with Integrity ends 12/31/2024. An RFP will need to be released soon to accommodate a 1/1/2025 contract start date. We will discuss further at the meeting, but a resolution is included if the Fund deems it necessary to act at the meeting. Executive Director said there is a resolution in the agenda which approves an RFP release for the health center, Medicare Advantage and Medical TPA.

MOTION TO APPROVE RESOLUTION 16-24 APPROVING RELEASE OF RFP FOR HEALTH CENTER ADMINISRATOR, MEDICAL TPA AND MEDICARE ADVANTAGE PROVIDER

MOTION: Commissioner Auger SECOND: Commissioner Beder VOTE: 5 Ayes, 0 Nays

MEDICAL CLAIMS RFP/CO-OPERATIVEM-The Medical TPA contract through Aetna and the Medicare Advantage contracts through Aetna and United terminate at the end of this year. The Fund

has the option to join a cooperative pricing system with other PERMA administered Funds in the State, while also releasing an RFP direct from the Fund. A discussion of both RFP options will occur at the meeting. There are resolutions prepared in the agenda for action, should the Committee see fit.

Executive Director reviewed the process of the cooperative approval and the members within in the system, along with the contracts to be procured. She said there is \$1500 fee to join and this would give the option to use the coop contracts or RFP independently. Ms. Kosensky county QPA, said that the only option the County would be if the RFPs are simultaneous, and said there are only 6 reasons to reject and using a Co-op contract would not fit one of the reasons. The Committee further discussed going through the Cooperative first, then do the other one because there is no reason a group has to take the Co-op. Mr. Hayes said there is no downside besides the \$1500. Ms. Kosensky said that there could be a game being played that vendors won't provide the best pricing. I said I would hope that our pricing would be good regardless. The Committee decided to move both resolutions then discuss further at the sub Committee level.

MOTION TO APPROVE RESOLUTION 17-24 APPROVING THE SOUTHERN SKYLANDS HELATH INSURANCE FUND JOIN THE HEALTH PRICING SYSTEM COOPERATIVE.

MOTION: Commissioner Hayes SECOND: Commissioner Auger VOTE: 5 Ayes, 0 Nays

2024 COMMITTEE APPOINTMENTS - We are still looking for Commissioners to be on our sub committees. Please reach out to Chair Mahr or Emily Koval.

<u>Finance & Contracts Committee</u> (allow 2-3 Commissioners)

1. Dan Hayes

2

Operations and Claims Committee (allow 2-3 Commissioners)

1. Anthony Ferrera

2.

PROGRAM MAMAGERS REPORT:

Mrs. Bailey introduced herself to the new members in the meeting and reviewed the informational report in the agenda.

ELIGIBILTY/ENROLLMENT -

Please direct any eligibility, enrollment, or system related questions to our dedicated Southern Skyland Regional HIF team. To contact the team, email somersetcountyinscom@permainc.com or fax to 856-266-9469

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

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

COVERAGE UPDATES: None

EXPRESS SCRIPTS UPDATE:

GLP-1 Weight Loss Program (Encircle) Recommendation Effective 9/1/24

The Program Manager has consulted with the MRHIF Pharmacy Benefit Manager (PBM) Express Scripts (ESI) in determining a program to assist with the increasing cost of GLP-1 medications being used for weight loss. The Encircle Program encompasses the criteria recommended for the drugs intended use; lifestyle modification, member engagement, overall adherence. As a result, the Program Manager is recommending the Encircle Program for Skylands participants who are approved for weight loss medications using the following criteria:

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

In addition to receiving an approved prior authorization (PA), below are 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 programmed to the member's ESI active account prior to delivery. The scale will record each weigh-in and will update the member's file automatically. **Members must weigh-in a minimum of 4 times a month**
- Members must engage with an assigned online Omada coach via a mobile application or web browser a minimum of 4 times a month

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

Members who have a current PA on file will be grandfathered until their PA on file has expired with ESI. Upon renewal of their PA they will be need to meet the above BMI requirements to be considered for approval. If approved, they will receive the Omada welcome kit and will need to adhere to the Encircle program requirements as outlined.

Communications will be sent to all impacted members with registration information. Once registered members will receive an access code to sign up for the Omada welcome kit.

PLEASE NOTE: Only those who are due to renew their PA or have recently been approved for a weight loss medication will receive a communication in the mail.

New groups joining 9/1/24 and after will be implemented with the Encircle Program.

Ms. Bailey said this is a prior authorization program and will not affect those that have a current prior authorization. In response to Commissioner Beder, Ms. Bailey said the coach is on an

application on the phone but also group setting. They just need to engage with either one. Not phone call or telehealth. Ms. Bailey said the engagement must happen 4 times a month and doesn't matter when. The member needs to show 5% loss each month. If not shown, the PA will not be renewed.

In response to Commissioner Sluka, Ms. Bailey said the member will need to call or go online to get the drug. Express Scripts is keeping in line with FDA approval. Grandfathered only until the prior authroization expires and ESI will notify the member. The member receives a scale that is Bluetooth to watch or app.

Ms. Bailey said this drug spend is increasing by the year. She said the total cost 1300 members on weight loss – all Funds spend \$5 million and we are already at \$2.4 million so its trending much higher than last year and this is for weight loss only, not diabetes.

Commissioner Beder said the evidence in past experience that we expect the cost to trend down. Mr. Yuk said this brand new program as of 5/1. The modeling shows that there is a trend gong up. This is not affecting diabetes conditions, this is only for weight loss specific drugs. Ms. Bailey said there are a supply a demand issue that is affecting the diabetes. Mr. Yuk said the GLP – 1 manufacturer is going after multiple diagnosis, not just weight loss and diabetes. Ms. Bailey said there will be reporting available in 6+ months. Commissioner Beder said he is skeptical that this program will work on the cost.

MOTION TO APPROVE RESOLUTION 18-24 APPROVING THE GLP-1 PROGRAM EFFECTIVE SEPTEMBER 1, 2024:

MOTION: Commissioner Beder SECOND: Commissioner Auger VOTE: 5 Ayes, 0 Nays

OPERATIONAL UPDATES: None

2024 LEGISLATIVE REVIEW:

FREE COVID-19 At-HomeTest - Effective March 8, 2024, the free COVID test program has been suspended. All orders placed on or before March 8th were shipped and delivered.

Medical and Rx Reporting: The required RxDC reporting for the 2023 plan year has been submitted to all carriers on behalf of the Southern Skylands Regional Health Insurance Fund. The reporting was submitted for all groups that have pharmacy in the Fund.

No Surprise Billing and Transparency Act– Continued Delays - The Health Insurance Funds, including Southern Skyland Regional HIF protect plan members from surprise billing with involuntary out of network balance bills with a hold harmless clause:

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

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

- Issuing updated ID Cards with additional out of pocket information
- Providing transparency in coverage machine-readable files
- Providing price comparison tools
- Healthcare providers should work with insurance carriers to provide potential patients with good faith estimates of costs

2023 Specialized Audits - As approved through an RFP through the Program Manager's contract, the HIFs has acquired the services of AIM to conduct specialized audits for the Southern Skyland Regional HIF. AIM will complete medical claims audits for claims administered by Aetna. The claim audit being performed will determine Aetna's claim processing and financial accuracy of medical claims. AIM will also perform an Operation Review. Aim will perform an in-depth evaluation of the controls employed by the Aetna to ensure quality administration. **See Appendix.**

Carrier Appeals:

Submission	Appeal	Appeal	Reason	Determination	Determination
Date	Type/Carrier	Number			Date
02/20/2024	Aetna/Medical	SSRHIF 04-	Home	Upheld	02/29/2024
		01-2024	nursing care		

IRO Submissions:

Submission	Appeal	Appeal	Reason	Determination	Determination
Date	Type/Carrier	Number			Date
04/03/2024	Aetna/Medical	SSRHIF 04-	Home	Upheld	04/29/2024
		01-2024	nursing care	_	

FIRST QUARTER VITAL STATISTICS - Ms. Bailey reviewed the vital statistics report distributed at the meeting. Specifically, she said the independent labs utilization out of network is low hanging fruit for the Fund to address.

TREASURER - Fund Treasurer reviewed the Bills Lists and Treasurer's report through April 2024 is included in the Agenda.

MOTION TO APPROVE RESOLUTION 19-24 APPROVING THE TREASURERS REPORT AND BILLS LISTS FOR APRIL AND MAY 2024:

MOTION: Commissioner Ferrara SECOND: Commissioner Beder

VOTE: Unanimous

ATTORNEY - Fund Attorney stated no report.

INTEGRITY HEALTH - Lily Lazaro reviewed the utilization report through March 2024.

She said that there were 41 chiro visits and 64 PT visits. She said we are adding a Saturday chiro hours which will be allocated without adding hours to one person. Updated Behavioral Health hours. Trying to increase utilization. Later hours are preferred, so for PT we extended to 7pm

.

In response to Commissioner Erickson, Ms. Lazaro said the center is only open until 2 on Saturdays, so we would have to pull those hours from another day but will bring back to the team.

PROSPECT REPORT – Executive Director reviewed the report included n the agenda stating that there are no 'hot' prospects at this point to request authorization to offer membership but is important to build the operations committee so they can review before the meeting.

AETNA: Mr. Silverstein reviewed the Aetna reports through February and March. Mr. Silverstein said that the Hackensack meridian is up on 7/1 and is slowly moving along because they are asking for double digit increases. He would not be surprised if letters go out as this is normal for aggressive negotiations. Ms. Bailey sent notification to brokers that this is in the works.

EXPRESS SCRIPTS: Ms. Patel reviewed the reports included in the agenda. She also reviewed the top indications by drug. She said 45% of the spend is by the top 25 specialty drugs.

OLD BUSINESS - None.

NEW BUSINESS - The Committee requested action to add the County QPA as the Fund QPA at no additional fee. The Administrator and Attorney will work on a resolution.

MOTION TO OPEN PUBLIC COMMENT:

MOVED: Commissioner Auger SECOND: Commissioner Ferrera

VOTE: Unanimous

PUBLIC COMMENT - None

MOTION TO CLOSE PUBLIC COMMENT:

MOVED: Commissioner Auger SECOND: Commissioner Beder

VOTE: Unanimous

MOTION TO ADJOURN:

MOVED: Commissioner Auger SECOND: Commissioner Ferrera

VOTE: Unanimous

MEETING ADJOURNED: 10:43am NEXT MEETING: July 9, 2024 at 9:30am

Minutes prepared by:

Emily Koval, Associate Executive Director

APPENDIX II

Southern Skylands Regional Fund 2023 Specialized Audits

Mental Health Parity Act

The Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) is a federal law that generally prohibits group health plans and health insurance issuers that provide mental health or substance use disorder (MH/SUD) benefits from imposing less-favorable benefit limitations on those benefits than on medical/surgical benefits. Benefit treatment limitations include quantitative treatment limits (QTLs), which are expressed numerically (such as a certain number of outpatient visit limits), and non-quantitative treatment limits (NQTLs), which otherwise limit the scope or duration of benefits for treatment under a plan or coverage.

Group health plans are required to perform and document comparative analyses of the design and application of NQTLs on MH/SUD benefits in order to demonstrate compliance with the MHPAEA. Under the Consolidated Appropriations Act (CAA), plans are required to have an NQTL comparative analyses and supporting information demonstrating such compliance with MHPAEA and its requirements.

AIM will review the plan language and Aetna's NQTL analysis performed for the HIF to determine compliance with the MHPAEA. AIM will assess the HIF benefit plan designs for QTL compliance and determine if the plan design contains any red flags (e.g., PCP vs Specialist; nutritional counseling; autism limits) and provide recommendations for remediation.

No Surprises Act

The No Surprises Act (NSA) protects people covered under group health plans from receiving surprise medical bills when they receive most emergency services, non-emergency services from out of-network providers at innetwork facilities, and services from out-of-network air ambulance service providers. It also establishes an independent dispute resolution process for payment disputes between plans and providers and provides new dispute resolution opportunities for uninsured and self-pay individuals when they receive a medical bill that is substantially greater than the good faith estimate they get from the provider.

AIM will review HIF claims to determine if Aetna is adjudicating claims in accordance with the requirements and mandates of the NSA. AIM will identify any changes in prices paid to out-of-network providers such as anesthesiologists at in-network facilities and to in-network anesthesiologists before and after surprise-billing legislation.

Gene Therapy

Later in the year or as cases come to light, AIM will review Gene Therapy costs under the HIF. AIM will confirm the claims administrator is administering the necessary care management programs associated with the advances in science and medicine, specifically this new type of disease mediation: Gene Therapy.