# SouthernSkylands

AGENDA OCTOBER 8, 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:**

October 8, 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 - July 9, 2024 Open Public Meeting (Appendix I)

#### **REPORTS:**

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SCHEDULED NEXT MEETING -November 12, 2024	
SCHEDOLED NEAT MEETING -November 12, 2024	

**MEETING ADJOURNMENT** 

#### SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND EXECUTIVE COMMITTEE MEETING OCTOBER 8, 2024 9:30 AM

#### FINANCIAL REPORTS - COMMISSION AND HEALTH INSURANCE FUND

- 1. Skylands Fund Financial Fast Track as of July 31, 2024 (page 5)
- **2. Ratios Report -** as of July 31, 2024 (page 7)

#### **FUND RFPS**

The Fund issued an RFP for Medical TPA in early September. The results were received and reviewed by the County and will be discussed in closed session. Resolution 24-24 will be distributed at the meeting for Committee action.

The professional RFPs were released and due October 23, 2024.

The Medicare Advantage RFP is in development and expect to have it released prior to the next meeting.

#### 2025 SKYLANDS BUDGET - INTRODUCTION

The 2025 proposed budget and proposed assessments are on located on page 9 of this report. 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 November 12, 2024, at Somerset County Administration Building allowing for Open Enrollment to occur thereafter. Rate reports will be released by October 15.

**Motion:** Motion to introduce the 2025 Southern Skyland Regional Health Insurance Fund Budget in the amount of \$60,167,688 and to advertise a public hearing of the budget adoption on November 12, 2024.

#### **NEW MEMBERS**

Over the past year, the Fund has welcomed 5 new members. It is being recommended to take a hiatus on new members to allow the Fund to review the new member's claims experience. When appropriate, the Finance Committee will bring new membership recommendations to the Executive Committee.

#### SPLIT BILLS AND DECEMBER BILLS

For the upcoming 2025 renewal updates, we request that each entity with retirees contributing a percentage provide any changes to the contribution rate by November 1, 2024 to the enrollment team ensuring accurate coupons are issued.

Due to the timeline of the 2025 budget, we are asking members to pay the December bill twice, with the February 2025 bill being updated with the new rates and any adjustments for the January bill.

	SOUTHER		AST TRACK REPORT	,	
		AS OF	July 31, 2024		
		AD OF	ouly 01, 202+		
		THIS	YTD	PRIOR	FUND
		MONTH	CHANGE	YEAR END	BALANCE
UNDERWRITING INC	OME	4,633,896	32,219,940	262,252,633	294,472,5
CLAIM EXPENSES		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0_,0,0		
Paid Claims		3,909,570	26,336,946	214,781,777	241,118,7
IBNR		(6,955)	638,800	3,103,390	3,742,1
Less Specific Exces	SS	-	(253,594)	(3,839,101)	(4,092,6
Less Aggregate Ex		-	-	-	( ) /
TOTAL CLAIMS		3,902,615	26,722,152	214,046,065	240,768,2
EXPENSES		3,302,013	20,722,132	214,040,003	240,700,2
MA & HMO Premiu	ıms	226,805	1,495,156	8,118,576	9,613,
Excess Premiums		154,872	1,088,086	12,134,440	13,222,
Administrative		456,388	3,391,458	22,866,871	26,258,
TOTAL EXPENSES		838,064	5,974,701	43,119,886	49,094,5
	//1 055) /1 2 2)				
UNDERWRITING PROFIT	/(LUSS) (1-2-3)	(106,783)	(476,913)	5,086,681	4,609, 505,
		17,060	146,912	358,463	505,
DIVIDEND INCOME	SS) (4.5.6)	(00.724)	(220,001)	- - - -	F 11F 1
STATUTORY PROFIT/(LO	SS) (4+5+6)	(89,724)	(330,001)	5,445,144	5,115,1
DIVIDEND		-	-	-	
Transferred Surplus IN		_	_		
		-	-		
Transferred Surplus OU		-	-	-	
STATUTORY SURPLU	S (7-8+9)	(89,724)	(330,001)	5,445,144	5,115,1
		SURPLUS (DEFICI	TS) BY FUND YEAR		
Closed	Surplus	5,604	(107,352)	4,595,485	4,488,
cioscu	Cash	5,604	(76,495)	4,527,710	4,451,
2023	Surplus	(127,564)	(239,838)	849,659	609,
	Cash	(198,911)	(1,951,407)	2,770,761	819,
2024	Surplus	32,237	17,189	, , ,	17,
	Cash	385,401	(296,352)		(296,
TAL SURPLUS (DEFICI	TS)	(89,724)	(330,001)	5,445,144	5,115,1
TAL CASH	,	192,094	(2,324,253)	7,298,472	4,974,2
TAL CASIT		The state of the s	S BY FUND YEAR	7,230,472	7,377,2
TOTAL CLOSED YEAR CLA	AIMS	4,187	50,269	179,897,251	179,947,
FUND YEAR 2023					
Paid Claims		179,235	3,530,968	31,045,424	34,576,
IBNR		(40,344)	(2,985,461)	3,103,390	117,
Less Specific Exce		-	(238,920)	-	(238,
Less Aggregate Ex	cess	-	-	-	
TOTAL FY 2023 CLAIMS		138,891	306,586	34,148,814	34,455,
FUND YEAR 2024		0 =00 4 12	22		
Paid Claims		3,726,148	22,750,421		22,750,
IBNR		33,389	3,624,261		3,624,
Less Specific Exces		-	(9,386)		(9,
	0000		_		
Less Aggregate Ex	cess		20 202 202		
Less Aggregate Ex	cess	3,759,537	26,365,297		26,365,

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 JULY 31, 2024

#### BY FUND YEAR

	SSRHIF 2024	SSRHIF 2023	SSRHIF Closed Year	FUND BALANCE
ASSETS	2021	2020	Grosed rear	211211 (02
Cash & Cash Equivalents	(296,352)	819,355	4,451,215	4,974,218
Assesstments Receivable (Prepaid)	3,486,968	-	-	3,486,968
Interest Receivable	-	-	-	-
Specific Excess Receivable	9,386	-	-	9,386
Aggregate Excess Receivable	-	-	-	-
Dividend Reœivable	-	-	-	-
Prepaid Admin Fees	2,417	-	-	2,417
Other Assets	2,036,752	(43,637)	36,917	2,030,032
Total Assets	5,239,171	775,718	4,488,133	10,503,021
LIABILITIES				
Accounts Payable	_	_	_	_
IBNR Reserve	3,624,261	117,929	-	3,742,190
A4 Retiree Surcharge	4,150	-	-	4,150
Dividends Payable	-	-	-	-
Acrued/Other Liabilities	1,593,570	47,968	-	1,641,538
Total Liabilities	5,221,981	165,897	-	5,387,878
EQUITY				
Surplus / (Defiat)	17,189	609,821	4,488,133	5,115,143
Total Equity	17,189	609,821	4,488,133	5,115,143
	5 030 454	885 B40	4 400 422	40 502 024
Total Liabilities & Equity	5,239,171	775,718	4,488,133	10,503,021
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 I	HEALTH INSURANCE	E Fl	UND										
RATIOS													
							F'	Y2024					
INDICES	2023		JAN		FEB	MAR		APR		MAY		JUN	JUL
Cash Position	7,298,472	-	4,767,153		4,979,609	 5,527,786	-	5,084,246		5,002,291	-	4,782,124	\$ 4,974,218
IBNR	3,103,390	-	3,248,924	-	3,478,206	 3,594,507	-	3,715,009	_	3,728,982	-	3,749,145	\$ 3,742,190
Assets	8,835,598		10,088,683		9,526,540	10,412,913				10,409,395		10,565,265	\$ 10,503,021
Liabilities	3,390,454		3,917,867		3,653,220	3,780,192				4,938,871		5,360,399	\$ 5,387,878
Surplus	5,445,144	\$	6,170,815	\$	5,873,320	\$ 6,632,721	\$	5,779,424	\$	5,470,523	\$	5,204,866	\$ 5,115,143
Claims Paid Month	2,444,346	\$	2,871,259	\$	3,896,394	\$ 3,234,147	\$	4,438,381	\$	4,080,292	\$	3,906,902	\$ 3,909,570
Claims Budget Month	2,957,373	\$	3,776,467	\$	3,765,668	\$ 3,669,579	\$	3,749,376	\$	3,723,408	\$	3,722,836	\$ 3,732,233
Claims Paid YTD	33,876,852	\$	2,871,259	\$	6,767,653	\$ 10,001,800	\$	14,440,181	\$	18,520,474	\$	22,427,376	\$ 26,336,946
Claims Budget YTD	34,654,637	\$	3,776,467	\$	7,542,135	\$ 11,211,714	\$	14,961,090	\$	18,684,499	\$	22,407,335	\$ 26,139,568
RATIOS													
Cash Position to Claims Paid	2.99		1.66		1.28	1.71		1.15		1.23		1.22	1.27
Claims Paid to Claims Budget Month	0.83		0.76		1.03	0.88		1.18		1.1		1.05	1.05
Claims Paid to Claims Budget YTD	0.98		0.76		0.90	0.9		1.0		1.0		1.0	1.01
Cash Position to IBNR	2.35		1.47		1.43	1.54		1.37		1.34		1.28	1.33
Assets to Liabilities	2.61		2.58		2.61	2.75		2.4		2.11		1.97	1.95
Surplus as Months of Claims	1.84		1.63		1.56	1.81		1.54		1.47		1.4	1.37
IBNR to Claims Budget Month	1.05		0.86		0.92	0.98		0.99		1		1.01	1.00

#### SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND

#### 2024 Budget Status Report

as of July 31, 2024

	as of July	7 51, 2024				
				YTD	\$ Variance	% Varaiance
Expected Losses	YTD Budgeted	Annual	Latest Filed	Expensed		
Medical Claims (Aetna)	20,461,663	35,115,720	26,160,618	20,530,906	(69,243)	0%
Prescription Claims (Express Scripts)	7,486,697	12,843,496	10,511,270	, ,	, , ,	
Prescription Rebates (Express Scripts)	(1,808,792)	(3,100,787)	(3,100,787)			
Subtotal Prescription	5,677,905	9,742,709	7,410,483	5,834,391	(156,486)	-3%
Subtotal Claims	26,139,568	44,858,429	33,571,101	26,365,297	(225,729)	-1%
Medicare Advantage- AETNA-MA	225,494	438,350	0			
Medicare Advantage - UHC-MA	440,995	769,815	648,715			
Subtotal Insured Programs	666,489	1,208,165	648,715	664,381	2,108	0%
Horizon Dental	707,413	1,216,273	1,206,406	830,775	(123,362)	-17%
Partnership Health Center - Integrity Management	427,088	732,370	607,740	354,166	72,922	17%
Partnership Health Center - Rent	114,333	196,000	196,000	138,229	(23,896)	-21%
Partnership Health Center - Facility Expenses	1,677,858	2,876,328	2,312,314	1,589,399	88,459	5%
Subtotal PHC	2,219,279	3,804,698	3,116,054	2,081,793	137,486	6%
Reinsurance						
Specific	1,087,944	1,869,061	1,518,982	1,088,086	(142)	0%
Total Loss Fund	30,820,692	52,956,627	40,061,258	31,030,332	(209,640)	-1%
Contingency	71,006	121,724	444,012	-	71,006	100%
Expenses						
Legal	5,833	10,000	10,000	5,833	(0)	0%
Executive Director/Program Manager	321,426	555,513	428,743	390,135	(65)	0%
Enrollment Vendor	68,644	118,636	93,408	Included Above	in Executive Dir	ector Fee
TPA - Aetna	484,730	831,264	662,085	485,103	(373)	0%
Actuary	8,458	14,500	8,364	8,458	(0)	0%
Auditor	8,960	15,360	15,667	8,960	-	0%
Consulting	164,087	289,885	127,723	164,086	1	0%
Marketing	43,750	75,000	75,000	43,750	-	0%
Subtotal Expenses	1,105,888	1,910,159	1,420,990	1,106,326	(438)	0%
Miscellaneous and Contingency	6,071	10,407	10,407	22,514	(16,443)	-271%
Claims Auditor	23,333	40,000	40,000	23,333	(0)	0%
GASB 75 Reporting	1,750	3,000	3,000	1,750	-	0%
A4 Surcharge	18,112	31,531	31,634	18,112	0	0%
ACA Taxes	6,417	11,000	11,000	6,417	(0)	0%
Subtotal Miscellaneous Expenses	55,683	95,938	96,041	72,126	(16,444)	-30%
Total Expenses	1,161,571	2,006,097	1,517,031	1,178,453	(16,882)	-1%
Total Budget	32,053,269	55,084,447	42,022,301	32,208,785	(155,516)	0%
Total Dudget	34,033,409	33,004,447	44,044,301	34,400,705	(155,510)	U%

Sout	hern Skyland Regional Heal	th Insurance Fund			
	Certified Budget			Print date	07-Oct-24
	Census:	Monthly	Annual		
	Medical Aetna	1,860	22,320		
	Rx ESI	2,168	26,016		
	Medicare Advantage - Medical	642	7,704		
	Rx No Medical (Incl in Rx above)	341	4092		
	` '				
	Medicare Advantage - Only (Incl a	304	3648		
	LINETTEMS	2024 Annualized Budget	2025 Proposed Budget	\$ Change	% Change
1	Medical Claims (Aetna)	\$ 35,197,739	\$ 37,519,914	\$ 2,322,175	6.60%
2		Φ 25.105.520	ф 25.510.01.4	ф 2222.1 <b>5</b> 5	6.600/
3	Subtotal Medical Claims	\$ 35,197,739	\$ 37,519,914	\$ 2,322,175	6.60%
4	Prescription Claims (Express Scrip		\$ 15,677,379	\$ 2,803,362	21.78%
5	Prescription Rebates (Express	\$ (3,100,787)	\$ (4,311,279)	\$ (1,210,492)	39.04%
6					
7	Prescription Claims Subtotal	\$ 9,773,230	\$ 11,366,100	\$ 1,592,870	16.30%
8	Subtotal Claims	\$ 44,970,969	\$ 48,886,014	\$ 3,915,045	8.71%
9					
10	Medicare Advantage- AETNA-MA	\$ 511,803	\$ 639,744	\$ 127,941	25.00%
11	Medicare Advantage - UHC-MA	\$ 791,335	\$ 1,192,612	\$ 401,277	50.71%
12	Subtotal Medicare Advantage	\$ 1,303,138	\$ 1,832,356	\$ 529,218	40.61%
13					
14	Horizon Dental	\$ 1,223,465	\$ 1,226,220	\$ 2,755	0.23%
15					
16	Partnership Health Center - Inte	\$ 733,800	\$ 733,800	\$ -	0.00%
17	Partnership Health Center - Leas		\$ 196,000	\$ -	0.00%
18	Partnership Health Center - Exp		\$ 3,020,141	\$ 143,816	5.00%
19	Subtotal PHC	\$ 3,806,125	\$ 3,949,941	143,816	3.78%
20	Subtouriffe	φ 3,000,123	ψ 3,545,541	140,010	3.7070
	D.:				
21	Reinsurance	f 1.070.050	¢ 2.104.424	225 474	12.000/
22	Specific	\$ 1,878,950	\$ 2,104,424	225,474	12.00%
23			*	4.04.5.000	0.050/
24	Total Loss Fund	\$ 53,182,647	\$ 57,998,955	\$ 4,816,308	9.06%
25	a				0.0004
26	Contingency	\$ 121,724	\$ 121,724	0	0.00%
27					
28	Expenses				
29	Legal	\$ 10,000	\$ 10,000	0	0.00%
30	Executive Director/Program Mana		\$ 574,284	11,260	2.00%
31	Enrollment Vendor	\$ 120,240	\$ 120,240	0	0.00%
32	TPA - Aetna	\$ 833,206	\$ 833,206	0	0.00%
33	Actuary	\$ 14,500	\$ 14,790	290	2.00%
34	Auditor	\$ 15,360	\$ 15,667	307	2.00%
35	Consulting	\$ 301,163	\$ 305,475	4,312	1.43%
36	Marketing	\$ 75,000	\$ 75,000	0	0.00%
37					
38	Subtotal Expenses	\$ 1,932,493	\$ 1,948,662	\$ 16,170	0.84%
39					
40	Miscelleneous				
41	Miscellaneous and Contingency	\$ 10,407	\$ 10,407	0	0.00%
42	Claims Auditor	\$ 40,000	\$ 40,000	0	0.00%
43	GASB 75 Reporting	\$ 3,000	\$ 3,000	0	0.00%
44	A4 Surcharge	\$ 32,125	\$ 33,940	\$ 1,815	5.65%
45	ACA Taxes	\$ 11,000	\$ 11,000	\$ -	0.00%
46	Subtotal Miscellaneous	\$ 96,532	\$ 98,347	\$ 1,815	1.88%
47	Subtotal Miscellancous	Ψ 70,332	Ψ 70,54 <i>1</i>	1,013	1.00%
48	Total Expenses	\$ 2,029,025	\$ 2,047,010	\$ 17,985	0.89%
48	TOTAL EAPONSES	Ψ 2,029,025	\$ 2,047,010 9	Ψ 17,385	0.09%
	Total Rudget	¢ 55.222.200		¢ 4.924.202	0.740/
50	Total Budget	\$ 55,333,396	\$ 60,167,688	\$ 4,834,293	8.74%

Southern Skyland Reg	ional Health Insurance Fund	t		
2025 PROPOSED vs ANNUAL	ASSESSMENTS BY MEMBER			
	Annualized Assessments FY2024	Proposed Assessments FY2025	Difference \$	Difference %
Group Name	Total	Total	Total	Total
Hillsborough	3,935,736	4,252,500	316,764	8.05%
Manville	1,261,020	1,377,084	116,064	9.20%
Peapack and Gladstone	701,868	769,404	67,535	9.62%
Raritan	3,760,044	4,110,252	350,208	9.31%
Somerset County	35,009,368	38,071,044	3,061,676	8.75%
Somerset County Library	2,981,541	3,209,736	228,195	7.65%
Somerset County Parks	3,919,182	4,197,300	278,118	7.10%
Somerset County Vo Tech	2,497,308	2,655,864	158,556	6.35%
Somerville	1,366,584	1,469,580	102,996	7.54%
Totals	55,432,652	60,112,764	4,680,112	8.44%

#### **RESOLUTION NO. 25-24**

### SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND INTRODUCTION OF THE 2025 PROPOSED BUDGET

WHEREAS, The Southern Skyland Regional Health Insurance 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 October 8, 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 \$60,167,688 shall be held at the Fund's regularly scheduled and advertised meeting of November 12, 2024 to be held at the Somerset County Administration Building 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.

BY:			
C	HAIRPERSON	1	
ATTEST	:		
SEC	CRETARY		

ADOPTED: October 8, 2024

#### Southern Skyland Regional HIF Program Manager

October 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**<sup>rd</sup> **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.

#### **OPERATIONAL UPDATES:**

#### Open Enrollment - 1/1/25 (Passive)

- Skyland Regional HIF OE will be held October 21st through November 1st
- $\circ$  All OE updates should be completed in WEX by November 8<sup>th</sup> to allow time for ID cards to be delivered to members by 1/1/25
- o 2025 Qualified HDHP Minimums will be updated as follows:
  - Deductible \$1,650 single/ \$3,300 family
  - Maximum Out of Pocket (MOOP) \$3,300 single/ \$\$6,600
- o OE guides are currently being updated and will be sent once finalized

#### \*\* Subject to change pending approval of the 2025 Budget\*\*

#### Direct Bill Enrollees: Dependent to 31, COBRA and Retirees:

On behalf of the Fund, WEX will be sending out notices to self-pay enrollees notifying them that their 2025 coupons will likely be received after January 1<sup>st</sup>. For your reference those notices are included in Appendix III of your agenda.

#### **COVERAGE UPDATES:**

#### Onsite Flu Vaccine Clinic Vendor List

Approved onsite flu vaccine clinic vendors list are included as an attachment sent with the agenda. Skyland Regional HIF does not coordinate onsite flu vaccine clinics, groups can reach out to the vendors directly to schedule.

#### **EXPRESS SCRIPTS UPDATE:**

#### 2Q2024 SaveOn Savings (1/1/2024 through 6/16/24)

In 2Q2024, the Skyland Regional Health Insurance Fund has saved \$288,853 for members enrolled in SaveOn, an additional \$139,460 in savings from 1Q2024. There are currently 69 participants in the program, an increase of 13 members compared to 1Q2024. In 2024, Skyland members who used SaveOn saved a total of \$698 in copays. The average savings per prescription to date is \$897. See Appendix for full report.

#### **Top 5 Therapeutic Categories:**

- Inflammatory Conditions
  - o 37 members, totaling \$138,794 in savings
- Asthma & Allergy
  - o 18 members, totaling \$41,609 in savings
- Cancer
  - o 8 members, totaling \$77,613 in savings
- Multiple Sclerosis
  - o 3 members, totaling \$14,084 in savings
- Endocrine Disorders
  - o 1 member, totaling \$7,123 in savings

#### Mail Order Drug Removal

Effective August 19th, 2024, ESI will no longer dispense the drugs on the attached list at their mail order facilities. Member communications have been sent to impacted members.

Please note the following:

- If a patient sends in a new prescription **or** requests a refill or renewal for a medication that is no longer stocked, the order will not be processed and the patient will receive a cancellation communication via their existing communication preference, to do one of the following:
  - Consult with their provider on whether an alternative medication available at home delivery is appropriate
  - Fill their prescription from an alternative pharmacy, such as a retail location in their community
- Only the drugs with the specific NDC noted on the attached are impacted
- ESI will continue to fill the drugs on the list through mail order until they no longer have the stock

Please note the impacted members at the MRHIF level is very small and should have little to no impact to members if following the above guidelines.

#### Mail Order - Less than 35-day supply

**Beginning October 22, 2024,** ESI will no longer dispense prescriptions written for less than 35-day supply for most medications at their mail order facilities. Members who want or need to continue

filling prescriptions written for less than a 35-day supply, rather than moving to an extended day supply will be required to fill at one of ESI retail participating pharmacies.

There will be a limited number of drug categories where ESI will continue to dispense less than a 35-day supply. These drug categories are limited to drug classes where consolidation or a longer supply is not appropriate, such as the following:

- State and federally controlled drugs
- Over-the-counter medications
- Diabetic supplies
- Some maintenance medications
  - Mood altering medications
  - Sublingual nitroglycerin
  - Warfarin

Members currently receiving less than a 35-day supply from ESI were notified the week of October 8<sup>th</sup>. The communication will inform the member to contact their physician to confirm if a longer day supply is appropriate, and if not, advise them they will need to transfer their existing prescription to a participating retail pharmacy.

#### Notice of Creditable Coverage (NOCC)

CMS Annual Open Enrollment period for the 2025 plan year is October 15 – December 7. To meet the CMS requirement, Express Scripts mailed the NOCC letters the week of September 16<sup>th</sup> to those age 65 and older enrolled in ESI coverage through the HIFs.

#### **Encircle Program (GLP-1 Weight Loss)**

#### Effective September 1, 2024:

- Members with new prescriptions, including renewal prescriptions for expired prior authorizations (PA), will need to meet the following criteria to be approved for a GLP-1 weight loss medication:
  - o BMI > 32 OR
  - o BMI between 27 ≤ 32 WITH 2 or more documented comorbidities
- Members with an active approved PA prior to 9/1/2024 will be grandfathered
  - o Upon renewal of their PA, members will need to meet the above BMI requirements to be considered for approval
- PA renewals will need to include documentation to support the above BMI requirements for all members, regardless of members have been approved in the past.

#### Effective January 1, 2025:

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

• Members will receive a welcome kit from Omada free of charge. The kit includes a digital

scale and information on downloading the mobile app and/or using the web browser. The scale is programmed to the member's ESI active account prior to delivery. The scale will record each weigh-in and will update the member's file automatically. Members must 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 requirements outlined above, the following month in which they are non-compliant, they will not be able to refill their weight loss prescription. Members will be required to complete the missing weigh-ins and/or online coaching engagement in order to refill their prescription.

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

#### **2024 LEGISLATIVE REVIEW:**

#### 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. This was sent out as an attachment with the agenda.

Carrier Appeals: None IRO Submissions: None

# SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND BILLS LIST

Resolution No			AUGUST 2024
	WHEREAS, the Treasurer has	certified that funding is available to pay the following bills:	
		Skyland Regional Health Insurance Fund hereby authorizes the 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>VendorName</u>	Comment	InvoiceAmount
	INTEGRITY HEALTH, LLC	HEALTH CARE EXPENSE- FACILITY 07/24	213,648.99 <b>213,648.99</b>
		Total Payments FY 2024	213,648.99
		TOTAL PAYMENTS ALL FUND YEARS	213,648.99
	Chairperson	_	
	Attest:		
I	hereby certify the availability of sufficient un	Dated:encumbered funds in the proper accounts to fully pay the above claims	
		Treasurer	
		Heasurer	

# SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND SUPPLEMENTAL 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 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

<u>VendorName</u>	Comment	<u>InvoiceAmount</u>
RSC INSURANCE BROKERAGE INC	VOID AND REISSUE	-2,384.78 -2,384.78
JORDAN JACKSON	VOID AND REISSUE	-600.00 -600.00
AETNA HEALTH MANAGEMENT, LLC	MEDICARE ADVANTAGE 08/24	43,045.19 <b>43,045.19</b>
HORIZON BLUE CROSS BLUE SHIELD OF NJ HORIZON BLUE CROSS BLUE SHIELD OF NJ HORIZON BLUE CROSS BLUE SHIELD OF NJ HORIZON BLUE CROSS BLUE SHIELD OF NJ	COUNTY-A# 731345395-304881823 8/1/24 LIBRARY-488920617 INV 304881674 7/1/24 271255463-BOSS-INV 304842267 7/15/24 LIBRARY 273954962 INV 304881522 8/1/24	98,187.62 546.08 13,875.59 9,149.95 <b>121,759.24</b>
PERMA RISK MANAGEMENT SERVICES PERMA RISK MANAGEMENT SERVICES PERMA RISK MANAGEMENT SERVICES PERMA RISK MANAGEMENT SERVICES	POSTAGE 07/24 ENROLLMENT FEE 08/24 PROGRAM MGR FEE 08/24 ADMIN FEES 08/24	57.72 9,980.00 28,567.75 18,163.60 <b>56,769.07</b>
ASSUREDPARTNERS CAPITAL, INC	CONSULTANT FEE 08/24	4,524.66 <b>4,524.66</b>
ACRISURE NJ PARTNERS INS. SERVICES LLC	CONSULTANT FEE 08/24	2,377.96 <b>2,377.96</b>
RSC INSURANCE BROKERAGE INC	CONSULTANT FEE 08/24	2,384.78 2,384.78
FAIRVIEW INSURANCE AGENCY ASSOCIATES INC	CONSULTANT FEES 08/24	2,685.58 <b>2,685.58</b>
ACCESS ACCESS ACCESS	INV 10864944 DEPT 002 4/30/24 INV 10978749 DEPT 002 6/30/24 INV 10928961 DEPT 002 5/31/24 INV 11038266 DEPT 002 7/31/24	7.07 7.85 7.34 7.85 <b>30.11</b>
SOMERVILLE URBAN RENEWAL LLC	MONTHLY RENT 08/24	19,747.00 <b>19,747.00</b>
RSC INSURANCE BROKERAGE INC	REPLACE CK 1604. CONS FEE 07/24	2,384.78 2,384.78
JORDAN JACKSON	DJ SERVICES COLONIAL PARK 6/29/24	600.00 <b>600.00</b>

**CHECK TOTALS** 

253,323.59

ETING MGR 08/24  ETING MGR 08/24  IC REINSURANCE 08/24  ILTANT FEES 08/24	69,060.50 8,779.59 8,779.59 6,250.00 6,250.00 4,738.02 4,738.02
ETING MGR 08/24  IC REINSURANCE 08/24  1.  ILTANT FEES 08/24	8,779.55 6,250.00 6,250.00 55,796.60 4,738.02 4,738.02
IC REINSURANCE 08/24 1.  1.  ILTANT FEES 08/24	<b>6,250.0</b> 0 55,796.60 <b>55,796.6</b> 0 4,738.02 <b>4,738.0</b> 2
LTANT FEES 08/24	4,738.02 <b>4,738.0</b> 2
	4,738.02
OTALS 3	0.700.10
	υ,/ <b>99.1</b> 5
ayments FY 2024 56	1,122.78
L PAYMENTS ALL FUND YEARS 564	122.78

#### SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND BILLS LIST

Resolution No		SI	EPTEMBER 2024
	WHEREAS, the Treasurer has ce	rtified that funding is available to pay the following bills:	
		kyland Regional Health Insurance Fund hereby authorizes the arrants in payment of the following claims; and	
	FURTHER, that this authorization sh	nall be made a permanent part of the records of the Fund.	
FUND YEAR 2024	<u>VendorName</u>	Comment	InvoiceAmount
	INTEGRITY HEALTH, LLC	HEALTH CARE EXPENSE- FACILITY 08/24	237,258.47 <b>237,258.47</b>
		Total Payments FY 2024	237,258.47
		TOTAL PAYMENTS ALL FUND YEARS	237,258.47
	Chairperson	-	
	Attest:		
11	nereby certify the availability of sufficient unen	Dated:cumbered funds in the proper accounts to fully pay the above claim	s.
		Treasurer	

# SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND SUPPLEMENTAL 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 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.

CheckNumber	<u>VendorName</u>	<u>Comment</u>	<u>InvoiceAmount</u>
	AETNA HEALTH MANAGEMENT, LLC	MEDICARE ADVANTAGE 09/24	42,650.28 <b>42,650.28</b>
	HORIZON BLUE CROSS BLUE SHIELD OF NJ HORIZON BLUE CROSS BLUE SHIELD OF NJ HORIZON BLUE CROSS BLUE SHIELD OF NJ HORIZON BLUE CROSS BLUE SHIELD OF NJ	LIBRARY-488920617 INV 305084227 9/2/24 LIBRARY 27354962 INV 305084073 9/2/24 COUNTY-A# 731345395- 305084375 9/2/24 BOSS- 271255463 INV 305034843 8/14/24	546.08 9,212.33 97,953.78 13,933.87 <b>121,646.06</b>
	PERMA RISK MANAGEMENT SERVICES PERMA RISK MANAGEMENT SERVICES PERMA RISK MANAGEMENT SERVICES PERMA RISK MANAGEMENT SERVICES	ENROLLMENT FEE 09/24 ADMIN FEES 09/24 POSTAGE 08/24 PROGRAM MGR FEE 09/24	10,104.00 18,389.28 81.25 28,922.70 57,497.23
	SHAIN SCHAFFER, PC SHAIN SCHAFFER, PC SHAIN SCHAFFER, PC	LEGAL FEES - INV 11033 06/24 LEGAL FEES INV 11109 07/24 LEGAL FEES INV 11128 06/24-07/24	647.50 297.50 472.50 <b>1,417.50</b>
	ASSUREDPARTNERS CAPITAL, INC	CONSULTANT FEE 09/24	4,636.38 <b>4,636.38</b>
	ACRISURE NJ PARTNERS INS. SERVICES LLC	CONSULTANT FEES 09/24	2,762.63 <b>2,762.63</b>
	RSC INSURANCE BROKERAGE INC	CONSULTANT FEE 09/24	2,384.78 2,384.78
	FAIRVIEW INSURANCE AGENCY ASSOCIATES INC	CONSULTANT FEES 09/24	2,771.29 <b>2,771.29</b>
	INTEGRITY HEALTH, LLC INTEGRITY HEALTH, LLC	BEBETTER W/O COACH 7.2024 BEBETTER W/O COACH 6.2024	850.00 850.00 <b>1,700.00</b>
	SOM ERVILLE URBAN RENEWAL LLC	MONTHLY RENT 09/24	19,747.00 <b>19,747.00</b>
		CHECK TOTALS	257,213.15
	UNITED (MEDICARE ADVANTAGE)	MEDICARE ADVANTAGE 09/24	67,321.80 67,321.80
	AETNA	TPA FEES 09/24	69,359.14 <b>69,359.14</b>
	CONNER STRONG & BUCKELEW	CONSULTING FEES 09/24	8,370.47 <b>8,370.47</b>

CONNER STRONG & BUCKELEW	MARKETING MGR FEE 09/24	6,250.00 <b>6,250.00</b>
CAPITAL BENEFITS LLC	CONSULTANT FEES 09/24	4,329.57 <b>4,329.57</b>
HCC LIFE INSURANCE COMPANY	SPECIFIC REINSURANCE 09/24	157,077.12 <b>157,077.12</b>
INTEGRITY HEALTH, LLC	HEALTH MGMT FEE 08/24	50,546.44 <b>50,546.4</b> 4
	ACH TOTALS	363,254.54
	Total Payments FY 2024	620,467.69
	TOTAL PAYMENTS ALL FUND YEARS	620,467.69
Chairperson		
Attest:		
	Dated:	
I hereby certify the availability of sufficient unencum	nbered funds in the proper accounts to fully pay the above claims.	
	Treasurer	

#### SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND BILLS LIST

WHEREAS, the Treasurer has c	ertified that funding is available to pay the following bills:	
	·	
FURTHER, that this authorization s	shall be made a permanent part of the records of the Fund.	
VendorName	Comment	InvoiceAmount
INTEGRITY HEALTH, LLC	HEALTH CARE EXPENSE- FACILITY 09/24	254,351.15 <b>254,351.15</b>
	<b>Total Payments FY 2024</b>	254,351.15
	TOTAL PAYMENTS ALL FUND YEARS	254,351.15
Chairperson	_	
Attest:		
	Dated:	
	BE IT RESOLVED that the Southern a Fund Treasurer to issue we were sufficiently for the southern and the sou	Total Payments FY 2024  TOTAL PAYMENTS ALL FUND YEARS  Chairperson  Attest:

22

# SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND SUPPLEMENTAL BILLS LIST

Resolution No. \_\_\_\_\_ OCTOBER 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

<u>VendorName</u>	Comment	InvoiceAmount
AETNA HEALTH MANAGEMENT, LLC	MEDICARE ADVANTAGE 10/24	42,255.37
		42,255.37
PERMA RISK MANAGEMENT SERVICES	ADMIN FEES 10/24	18,047.12
PERMA RISK MANAGEMENT SERVICES	ENROLLMENT FEES 10/24	9,916.00
PERMA RISK MANAGEMENT SERVICES	PROGRAM MGR FEE 10/24	28,384.55
		56,347.67
ASSUREDPARTNERS CAPITAL, INC	CONSULTANT FEE 10/24	4,440.87
		4,440.87
ACRISURE NJ PARTNERS INS. SERVICES LLC	CONSULTANT FEES 10/24	2,517.84
		2,517.84
RSC INSURANCE BROKERAGE INC	CONSULTANT FEE 10/24	2,384.78
		2,384.78
FAIRVIEW INSURANCE AGENCY ASSOCIATES INC	CONSULTANT FEES 10/24	2,742.72
		2,742.72
ACCESS	INV 11082355 DEPT 002 8/31/24	10.62
		10.62
SOMERVILLE URBAN RENEWAL LLC	MONTHLY RENT 10/24	19,747.00
		19,747.00
	CHECK TOTAL	130,446.87
HCC LIFE INSURANCE COMPANY	SPECIFIC REINSURANCE 10/24	155,512.04
		155,512.04

UNITED (MEDICARE ADVANTAGE)	MEDICARE ADVANTAGE 10/24	65,546.28 <b>65,546.28</b>
AETNA	TPA FEES 10/24	69,023.17 <b>69,023.1</b> 7
CONNER STRONG & BUCKELEW	CONSULTING FEES 10/24	8,494.05 <b>8,494.0</b> 5
CONNER STRONG & BUCKELEW	MARKETING MGR FEE 10/24	6,250.00 <b>6,250.0</b> 0
CAPITAL BENEFITS LLC	CONSULTANT FEES 10/24	4,411.26 <b>4,411.2</b> 6
INTEGRITY HEALTH, LLC	HEALTH MGMT FEE 09/24	50,528.13 <b>50,528.1</b> 3
	ACH/WIRE TOTAL	359,764.33
	Total Payments FY 2024	490,211.80
	TOTAL PAYMENTS ALL FUND YEARS	490,211.80
Chairperson		
Attest:		
reby certify the availability of sufficient unencur	Dated: mbered funds in the proper accounts to fully pay the above clair	ns.
	 Treasurer	

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

Current Fund Year:	2024									
Month Ending:	June									
	Medical	PHC	Rx	Reinsurance	Dental	Cont.	Admin	Closed Year	TOTAL	
OPEN BALANCE	3,756,064.98	(48,440.35)	(712,283.17)	(320,317.59)	(257,185.93)	54,538.18	2,917,633.63	(387,719.09)	5,002,290.66	
RECEIPTS										
Assessments	2,558,959.95	271,297.19	673,937.21	126,128.67	0.00	8,683.91	223,796.08	0.00	3,862,803.01	
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Invest Pymnts	8,953.21	830.83	1,609.30	0.00	500.51	110.00	5,884.54	0.00	17,888.39	
Invest Adj	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Subtotal Invest	8,953.21	830.83	1,609.30	0.00	500.51	110.00	5,884.54	0.00	17,888.39	
Other *	151,051.78	0.00	523,627.48	0.00	38,886.34	0.00	467,756.27	0.00	1,181,321.87	
TOTAL	2,718,964.94	272,128.02	1,199,173.99	126,128.67	39,386.85	8,793.91	697,436.89	0.00	5,062,013.27	
EXPENSES										
Claims Transfers	3,131,764.58	0.00	1,189,497.61	0.00	0.00	0.00	0.00	(519.05)	4,320,743.14	
Expenses	107,579.42	420,801.00	0.00	77,270.28	118,488.33	0.00	165,297.59	72,000.00	961,436.62	
Other *	3,904,796.73	(541,978.22)	660,307.38	(96,367.45)	202,730.70	0.00	775,322.64	(4,904,811.78)	(0.00)	
TOTAL	7,144,140.73	(121,177.22)	1,849,804.99	(19,097.17)	321,219.03	0.00	940,620.23	(4,833,330.83)	5,282,179.76	
END BALANCE	(669,110.81)	344,864.89	(1,362,914.17)	(175,091.75)	(539,018.11)	63,332.09	2,674,450.29	4,445,611.74	4,782,124.17	

		CERT	IFICATION AN	ND RECONCIL	IATION OF CLAIN	MS PAYMENTS AN	ND RECOVERIES			
			SOUTHE	ERN SKYLAND	REGIONAL HEAL	TH INSURANCE	FUND	ı	1	
Month		June								
	Fund Year	2024								
Current	Tunu Tear	2024								
		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	June	June	June	June	Reconciled	Variance From	Month	
2024	Medical	14,247,295.09	3,065,869.19	0.00	17,313,164.28	0.00	17,313,164.28	14,247,295.09	3,065,869.19	
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Rx	7,020,531.75	1,189,497.61	0.00	8,210,029.36	0.00	8,210,029.36	7,020,531.75	1,189,497.61	
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Total	21,267,826.84	4,255,366.80	0.00	25,523,193.64	0.00	25,523,193.64	21,267,826.84	4,255,366.80	
2023	Medical	2,980,927.71	46,595.54	0.00	3,027,523.25	0.00	3,027,523.25	2,980,927.71	46,595.54	
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Rx	557,151.76	0.00	0.00	557,151.76	0.00	557,151.76	557,151.76	0.00	
	Vision	0.00	0.00	0.00	0.00	0.00		0.00	0.00	
	Total	3,538,079.47	46,595.54	0.00	3,584,675.01	0.00	3,584,675.01	3,538,079.47	46,595.54	
2022	Medical	33,869.91	19,299.85	0.00	53,169.76	0.00	53,169.76	33,869.91	19,299.85	
	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	33,869.91	19,299.85	0.00	53,169.76	0.00	53,169.76	33,869.91	19,299.85	
Closed Ye	ar Closed Year	2,906.06	(519.05)	0.00	2,387.01	0.00	2,387.01	2,906.06	(519.05)	
	Total	2,906.06	(519.05)	0.00	2,387.01	0.00	2,387.01	2,906.06	(519.05)	
	TOTAL	24,842,682.28	4,320,743.14	0.00	29,163,425.42	0.00	29,163,425.42	24,842,682.28	4,320,743.14	

SUMMARY OF CASH AND INVESTMENT INSTRUMENTS										
SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND										
	L FUND YEARS COMBINED		2101(2							
_	URRENT MONTH	June								
	JRRENT FUND YEAR	2024								
		Description:	Investors Bank							
		ID Number:								
		Maturity (Yrs)								
		Purchase Yield:								
		TO TAL for All								
	Ac	cts & instruments								
or	ening Cash & Investment Balance	\$5,002,290.66	5002290.66							
op	ening Interest Accrual Balance	\$0.00	0							
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	\$17,888.39	\$17,888.39							
6	Interest Paid - Term Instr.s	\$0.00	\$0.00							
7	Realized Gain (Loss)	\$0.00	\$0.00							
8	Net Investment Income	\$17,888.39	\$17,888.39							
9	Deposits - Purchases	\$6,223,924.05	\$6,223,924.05							
10	(Withdrawals - Sales)	-\$6,461,978.93	-\$6,461,978.93							
En	ding Cash & Investment Balance	\$4,782,124.17	\$4,782,124.17							
En	ding Interest Accrual Balance	\$0.00	\$0.00							
Plus Outstanding Checks \$251,664.51 \$251,664.51										
(Le	ess Deposits in Transit)	-\$1,227,831.09	-\$1,227,831.09							
Bal	ance per Bank	\$3,805,957.59	\$3,805,957.59							

#### **RESOLUTION NO. 26-24**

## SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND APPROVAL OF THE AUGUST, SEPTEMBER AND OCTOBER 2024 BILLS LIST

WHEREAS, the Southern Skyland Regional Health Insurance Fund held a Public Meeting on October 8, 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 August, September and October 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 August, September and October 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: C	ctober 8, 20	)24	
BY:			 
CHAIR	PERSON		
ATTEST:			
SECRE	TARY		 





County of Somerset

Total

Somerset County Library

Township of Hillsborough

Somerset County Park Commission

Somerset County Vocational & Technical School

540

41

87

18

697

6

4,538 219

11

393

161

34

5,853 258

1,907

176

127

120

24

2,379

759

29

955

### **Southern Skylands Regional** Partnership Health Centers Utilization Report

			P	· · · cui		.ciitcis t	otilization Report						
PHC Services							Specialized Service						
Category	01_Sub	scriber	02_Dep	endent	Total		Service	01_Su	bscriber	02_Dep	endent	Total	
	M	YTD (CY)	M	YTD (CY)	M	YTD (CY)		М	YTD (CY)	M	YTD (CY)	M	ΥT
Borough of Manville		1				1	-1 1 11 11						
Borough of Peapack and Gladstone		15	1	11	1	26	Behavioral Health	20		6		26	
Borough of Somerville	11	65	3	36	14	101	Care Coordination	169		34	353	203	
County of Somerset	854	7,049	299	2,645	1,153	9,694	Chiropractic	27	270	1	27	28	
Somerset County Library	72	567	32	283	104	850	COVID19 Test	15	110	4	48	19	
Somerset County Park Commission	147	964	18	201	165	1,165	COVID19 Vaccine		6		1		
Somerset County Vocational & Technical School	43	333	11	166	54		Flu Shot	1	7		5	1	
Township of Hillsborough	13	78	3	40	16		Lab	78	564	22	189	100	
Total	1,140	9,072	367	3,382	1,507	12,454	Member Services	4			112	4	
PHC Patients							Pharmacy	496	4,025	208	1,698	704	
Category	01 Sub	scriber	02 Den	endent <b>T</b> e	otal		Physical Therapy	87	529	17	132	104	
category	_	YTD (CY)		D (CY) N		TD (CY)	Physician or Nurse	228	1,752	69	677	297	
		110 (01)		D (CI) 1		10 (01)	Physician or Nurse Telemedicine		7	1	4	1	
Borough of Manville		1				1	Telemedicine BH	3	3 24	3	23	6	
Borough of Peapack and Gladstone		2	1	1	1	3	Telephone			1	21	6	
Borough of Somerville	2	6	2	3	4	9					17	8	
County of Somerset	322		140	311	462	952	Xray		56				
Somerset County Library	31	66	15	32	46	96	Total	1,140	9,072	367	3,382	1,507	
Somerset County Park Commission	48	87	14	46	62	132							
Somerset County Vocational & Technical School	13	35	8	24	21	59							
Township of Hillsborough	4	10	1	6	5	16							
Total	420	840	181	421	601	1,255							
Medications Dispensed													
Category	01_Subs	criber	02_Dep	endent	Total								
	M	YTD (CY)	M	YTD (CY)	M	YTD (CY)							
Borough of Peapack and Gladstone		7	1	13	1	20							
Borough of Somerville	5	35	2	12	7	47							

6,445

569

812

281

58

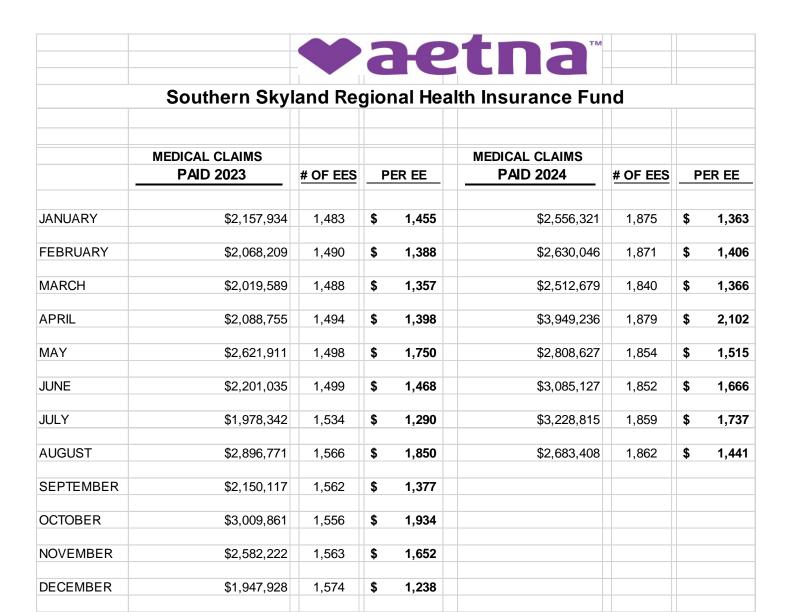
8,232



#### SOUTHERN SKYLANDS EMPLOYEE BENEFITS FUND

Monthly Claim Activity Report

October 8, 2024



\$23,454,258

1,862

1,526

\$1,574 \$1,513

2024 Average

2023 Average

**TOTALS** 

\$27,722,673

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

 Plan Sponsor Unique ID:
 All

 Customer:
 All

 Service Dates:
 01/01/2011 - 08/31/2024

Group / Control: 00115332 - SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE Line of Business:

**Paid Amt** 

\$171,125.67

\$109,376.70

Total: \$280,502.37





Medical Claims Paid Per Member: January 2024 - August 2024

Total Medical Paid per EE: \$1.574

#### **Network Discounts**

62.2% Inpatient: Ambulatory: 66.9% Physician/Other: 64.6% TOTAL: 65.0%

#### **Provider Network**

% Admissions In-Network: 97.8% % Physician Office: 95.8%

#### Aetna Book of Business:

Admissions 97.6%; Physician 91.8%

#### 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 August 2024)

Number of Claims Over \$50,000: 71 Claimants per 1000 members: 17.2 Avg. Paid per Claimant: \$112,239 Percent of Total Paid: 35.3%

Aetna BOB- HCC account for an average of 45.0% of total Medical Cost

#### Aetna One Choice Member Outreach: Thru August 2024

Total Members Identified: 967 Members Targeted for 1:1 Nurse

Support: 300

Members Targeted for Digital Activity: 471

Members Targeted for Group

Coaching: 196

Member 1:1 outreach completed:

Member 1:1 Outreach in Progress: 11

#### **Service Center Performance Goal Metrics YTD 2024**

#### **Customer Service Performance**

1st Call Resolution: Abandonment Rate: 0.73% Avg. Speed of Answer: 25.1 sec

**Claims Performance** 

Financial Accuracy: 98.84%\*

\*Q2 2024

90% processed w/in: 6.2 days 10.8 days 95% processed w/in:

#### Claims Performance (Monthly)

(August 2024)

90% processed w/in: 5.4 days 95% processed w/in: 11.2 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

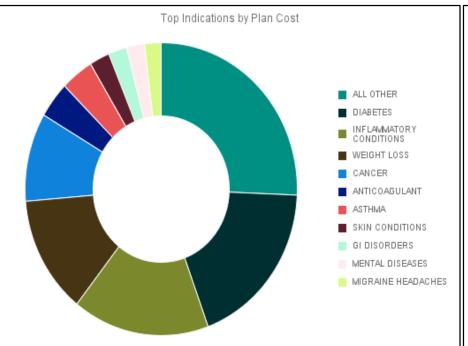


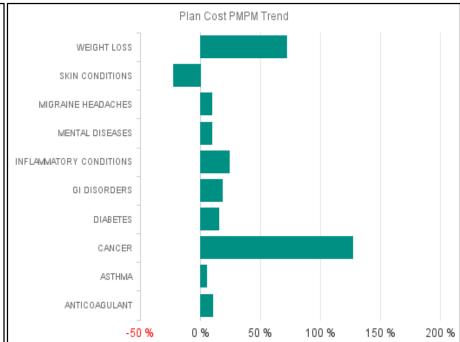
#### Southern Skylands Regional Health Insurance Fund

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	4,615	4,636	4,632	4,641							
Total Days	263,550	239,696	244,751	747,997	250,088	250,582	235,458	736,128	257,451	258,458							
Total Patients	2,093	1,990	1,994	3,019	2,034	2,100	1,962	2,982	2,055	2,055							
Total Plan Cost	\$1,063,988	\$1,146,803	\$1,133,373	\$3,344,164	\$1,154,291	\$1,276,143	\$1,316,657	\$3,747,092	\$1,306,545	\$1,280,958							
Generic Fill Rate (GFR) - Total	83.9%	83.1%	83.1%	83.4%	83.1%	82.8%	81.5%	82.5%	82.4%	82.0%							
Plan Cost PMPM	\$229.90	\$249.20	\$248.98	\$242.65	\$247.12	\$276.04	\$285.30	\$269.40	\$282.07	\$276.01							
%Change Plan Cost PMPM	14.9%	25.6%	-0.3%	12.3%	22.3%	19.4%	15.3%	18.7%	23.1%	13.2%							
Total Specialty Plan Cost	\$351,753	\$422,926	\$396,265	\$1,170,944	\$431,411	\$453,792	\$540,424	\$1,425,627	\$431,106	\$418,933							
Specialty %of Total Specialty Plan Cost	33.1%	36.9%	35.0%	35.0%	37.4%	35.6%	41.0%	38.0%	33.0%	32.7%							

#### **Top Indications**

Southern Skyland Regional Hlth (Current Period 01/2024 - 08/2024 vs. Previous Period 01/2023 - 08/2023) 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	25.2 %	6,621	\$1,838,239	\$49.73	33.5 %	25.8 %	28.4 %	5,496	\$1,314,763	\$43.27	36.6 %	28.5 %	14.9 %
2	2	INFLAMMATORY CONDITIONS	21.8 %	592	\$1,592,135	\$43.07	48.8 %	33.8 %	22.9 %	477	\$1,058,199	\$34.82	60.2 %	39.3 %	23.7 %
3	4	WEIGHT LOSS	17.5 %	1,201	\$1,278,060	\$34.58	3.4 %	5.1 %	13.2 %	543	\$612,914	\$20.17	3.3 %	10.5 %	71.4 %
4	3	CANCER	13.1 %	305	\$957,058	\$25.89	75.4 %	76.0 %	7.5 %	216	\$347,303	\$11.43	89.8 %	77.8 %	126.5 %
5	8	ANTICOAGULANT	5.4 %	935	\$392,154	\$10.61	17.9 %	19.0 %	6.3 %	801	\$293,359	\$9.65	25.0 %	22.0 %	9.9 %
6	7	ASTHMA	5.2 %	2,356	\$380,767	\$10.30	74.1 %	87.9 %	6.4 %	2,137	\$297,552	\$9.79	68.2 %	79.1 %	5.2 %
7	5	SKIN CONDITIONS	3.2 %	835	\$234,836	\$6.35	86.8 %	85.5 %	5.4 %	597	\$248,913	\$8.19	80.9 %	88.1 %	-22.4 %
8	9	GI DISORDERS	2.9 %	399	\$213,751	\$5.78	51.6 %	56.8 %	3.2 %	326	\$148,893	\$4.90	46.6 %	59.4 %	18.0 %
9	10	MENTAL DISEASES	2.9 %	629	\$209,806	\$5.68	76.2 %	84.3 %	3.4 %	427	\$157,726	\$5.19	71.7 %	85.4 %	9.4 %
10	6	MIGRAINE HEADACHES	2.7 %	330	\$194,389	\$5.26	37.9 %	52.4 %	3.2 %	248	\$146,517	\$4.82	37.1 %	55.5 %	9.1 %
		Total Top 10		14,203	\$7,291,195	\$197.25	43.8 %	48.0 %		11,268	\$4,626,139	\$152.24	46.2 %	49.8 %	29.6 %

Top Drugs

Southern Skyland Regional Hlth (Current Period 01/2024 - 08/2024 vs. Previous Period 01/2023 - 08/2023) Peer = Government - National Preferred Formulary

					Current Period			Previous Period				Trend	
Rank	Peer Rank	Brand Name	Indication	Specialty Drug	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Adjusted Rxs	Patients	Plan Cost	Plan Cost PMPM	Plan Cost PMPM
1	11	WEGOVY	WEIGHT LOSS	N	639	133	\$793,094	\$21.46	421	92	\$526,096	\$17.31	23.9 %
2	2	OZEMPIC	DIABETES	N	556	84	\$483,171	\$13.07	344	55	\$285,309	\$9.39	39.2 %
3	15	ZEPBOUND	WEIGHT LOSS	N	484	108	\$469,696	\$12.71	NA	NA	NA	NA	NA
4	1	MOUNJARO	DIABETES	N	325	54	\$318,145	\$8.61	95	21	\$89,396	\$2.94	192.6 %
5	55	REVLIMID	CANCER	Υ	22	4	\$299,527	\$8.10	NA	NA	NA	NA	NA
6	26	ELIQUIS	ANTICOAGULANT	N	561	87	\$287,349	\$7.77	425	65	\$195,773	\$6.44	20.7 %
7	6	STELARA	INFLAMMATORY CONDITIONS	Y	31	6	\$244,580	\$6.62	18	3	\$162,270	\$5.34	23.9 %
8	4	HUMIRA(CF) PEN	INFLAMMATORY CONDITIONS	Y	33	5	\$240,660	\$6.51	17	3	\$136,667	\$4.50	44.8 %
9	115	POMALYST	CANCER	Υ	9	1	\$197,788	\$5.35	NA	NA	NA	NA	NA
10	24	RINVOQ	INFLAMMATORY CONDITIONS	Y	30	5	\$159,896	\$4.33	16	2	\$80,456	\$2.65	63.4 %
11	20	FARXIGA	DIABETES	N	305	50	\$158,443	\$4.29	277	39	\$139,891	\$4.60	-6.9 %
12	10	JARDIANCE	DIABETES	N	285	44	\$155,820	\$4.22	211	31	\$111,692	\$3.68	14.7 %
13	28	TALTZ AUTOINJECTOR	INFLAMMATORY CONDITIONS	Y	30	5	\$149,485	\$4.04	23	4	\$112,468	\$3.70	9.3 %
14	25	ENBREL SURECLICK	INFLAMMATORY CONDITIONS	Y	25	4	\$135,431	\$3.66	16	4	\$77,743	\$2.56	43.2 %
15	1550	ABIRATERONE ACETATE	CANCER	Υ	15	2	\$117,874	\$3.19	9	1	\$70,669	\$2.33	37.1 %
16	69	XOLAIR	ASTHMA	Υ	68	5	\$111,005	\$3.00	69	6	\$102,623	\$3.38	-11.1 %
17	12	DUPIXENT PEN	SKIN CONDITIONS	Υ	32	5	\$109,508	\$2.96	30	6	\$81,892	\$2.69	9.9 %
18	134	NUCALA	ASTHMA	Υ	16	2	\$107,991	\$2.92	7	1	\$50,700	\$1.67	75.1 %
19	16	TREMFYA	INFLAMMATORY CONDITIONS	Υ	20	3	\$107,714	\$2.91	18	2	\$86,069	\$2.83	2.9 %
20	45	XARELTO	ANTICOAGULANT	N	192	28	\$96,356	\$2.61	173	26	\$81,677	\$2.69	-3.0 %
21	86	REXULTI	MENTAL DISEASES	N	68	11	\$92,370	\$2.50	64	12	\$80,322	\$2.64	-5.5 %
22	65	SKYRIZI ON-BODY	INFLAMMATORY CONDITIONS	Y	10	2	\$91,274	\$2.47	NA	NA	NA	NA	NA
23	79	XIFAXAN	GI DISORDERS	N	35	16	\$90,525	\$2.45	17	10	\$41,065	\$1.35	81.2 %
24	47	JANUVIA	DIABETES	N	168	25	\$84,902	\$2.30	173	24	\$83,872	\$2.76	-16.8 %
25	36	RYBELSUS	DIABETES	N	93	14	\$82,819	\$2.24	34	4	\$29,092	\$0.96	134.0 %
			Tot	al Top 25	4,052	_	\$5,185,425	\$140.28	2,457		\$2,625,742	\$86.41	62.3 %

# **APPENDIX I**

# SOUTHERN SKYLAND REGIONAL HEALTH INSURANCE FUND OPEN PUBLIC MEETING

JULY 9, 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
	Somerset Parks	Executive Committee	Present
Dan Hayes		Member	
	Somerset Vo Tech	Executive Committee	Absent
Adam Beder		Member	
Anthony	Hillsborough	Executive Committee	Present
Ferrera		Member	

# **FUND PROFESSIONALS PRESENT:**

Executive Director PERMA Risk Management Services

**Brandon Lodics** 

Program Manager Conner Strong & Buckelew

**Peter Mina** 

Fund Attorney Shain Schaffer

**Joel Shain** 

Fund Treasurer Yvonne Childress

Aetna Jason Silverstein

Express Scripts Hiteksha Patel

Integrity Health Lily Lazroe

### ALSO PRESENT:

Frank Covelli, World Insurance John Lajewski, Conner Strong & Buckelew Joseph Graham, Fairview Theresa Rippa Tiedge, Somerset County Bonnie Lacamera, Somerset County Karen Gilbert, Raritan Twp Kevin Sluka, Somerville

### MOTION TO APPROVE THE OPEN MINUTES OF MAY 14, 2024:

MOTION: Commissioner Auger SECOND: Commissioner Hayes

**VOTE:** 4 Ayes, 0 Nays

**CORRESPONDENCE:** None.

### **EXECUTIVE DIRECTOR'S REPORT**

**FINANCIAL REPORTS** – Executive Director reviewed the financials through April which showed a large deficit attributable to a large paid claim's month, which is supported by Aetna's data, due to the new growth in January. He stated the average claims paid for the year is 2% which is similar to last year, which shows a good trend year over year. Overall, 1.5 months of surplus.

**SHARED SERVICES ARRANGEMENT - QUALIFEID PURCHASING AGENT (QPA) -**Executive Director reviewed the shared services agreement with the County QPA, Melissa Kosensky. Executive Director thanked the County for this contribution.

# MOTION TO APPROVE RESOLUTION 19-24 AUTHORIZING THE SERVICES OF THE SOMERSET QUALIFIED PURCHASING AGENT

MOTION: Commissioner Auger SECOND: Commissioner Hayes

**VOTE:** 4 Ayes, 0 Nays

MOTION TO APPROVE RESOLUTION 20-24 AUTHORIZING THE SERVICES OF THE SOMERTSET COUNTY QUALIFIED PURCHASING AGENT AND THE ISSUANCE OF A REQUEST FOR PROPOSALS FOR SERVICES

MOTION: Commissioner Auger SECOND: Commissioner Hayes

**VOTE:** 4 Ayes, 0 Nays

**HEALTH INSURANCE COOPERATIVE PRICING SYSTEM -** Executive Director reviewed that the decision not to participate in the Health Insurance Cooperative with Skylands remaining independent with the County QPA, Melissa Kosensky, overseeing the RFPs. This resolution is a formality stating that they rescind the resolution to join the cooperative.

MOTION TO APPROVE RESOLUTION 21-24 RESCINDING RESOLUTION 16-24 TO PARTICIPATE IN THE HEALTH INSURANCE COOPERATIVE PRICING SYSTEM

MOTION: Commissioner Auger SECOND: Commissioner Hayes

**VOTE:** 4 Ayes, 0 Nays

**HEALTH CENTER - INTEGRITY CONTRACT -** Executive Director reviewed the proposed one-year extension of Integrity Health contraction through December 2025 as the Health Center Manager based on past practices and continuity of care.

# MOTION TO APPROVE RESOLUTION 22-24 EXTNEDING INTEGRITY HEALTH AS THE ADMINISTRATOR OF THE FUND HEALTH CENTER FOR ONE ADDITIONAL YEAR

MOTION: Commissioner Auger SECOND: Commissioner Hayes

**VOTE:** 4 Ayes, 0 Nays

**PCORI AND A4 SURCHARGE FEES -** The Executive Director informed that PCORI fees are included in the annual budget, and PERMA collects and pays these fees to the government on behalf of the entities enrolled in the Fund. Additionally, the vocational school is subject to the A4 surcharge, which compensates the SEHBP for the excess cost of health coverage for eligible retirees from school districts. This surcharge is also built into the annual budget.

In response to Chair Mahr's question about the duration of the A4 fees, Mr. Lodics explained that the surcharge has been in place for a long time and has historically been challenged, as it is a percentage of claims that is budgeted and incorporated into all educational programs.

### PROGRAM MAMAGERS REPORT

Mr. Mina 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**<sup>rd</sup> **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 16<sup>th</sup> 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.

Chair Mahr asked who the point of contact will be for new members receiving these communications for the first time. Mr. Mina mentioned that while he hasn't seen the updated communication, ESI is the designated point of contact, though brokers could also serve as good points of contact. Executive Director added that the program managers' team will distribute the letters in advance.

# 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 < 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.

In response to Chair Mahr's question of the specific fee point, Executive Director stated that the A4 surcharge is 1.8% of claims and the PCORI fee covers all enrollees.

### 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

**TREASURER** - Fund Treasurer reviewed the Bills Lists and Treasurer's report through June and July 2024, including the supplement bill lists for June 2024. Fund Treasurer reviewed the summary of cash transactions up until end of April 2024.

# MOTION TO APPROVE RESOLUTION 23-24 APPROVING THE TREASURERS REPORT AND BILLS LISTS FOR JUNE AND JULY 2024:

MOTION: Commissioner Auger SECOND: Commissioner Ferrera

VOTE: Unanimous

**ATTORNEY -** Fund Attorney stated no report.

**INTEGRITY HEALTH –** Lily Lazaro reviewed the utilization report through May 2024. She provided a comparison of this time last year and stated there was a 4.5% increase of services and 18% increase of care coordinator services. In response to the chiropractic services tripling this year, a new Chiropractic was hired which and increase the hours of availability and utilization. Additionally, there was a personnel change and actively looking for a new Member Advocate. Ms. Lazaro states that there is a dedicated team and there will be no disruptions of services and will send out a communication when a new person is hired.

Ms. Lazaro stated that they are continuing their efforts to increase involvement and visit people on site. She mentioned that Integrity was able to present information on their health center and mental health services at an employee's group meeting. In response to Commissioner Ferrera on how to schedule a visit with Integrity, Ms. Lazaro stated to reach out to her to discuss.

**AETNA:** Mr. Silverstein reviewed the Aetna reports through April 2024 including the high-cost claimants for April and May. He stated the dashboard metrics continue to perform well. He

provided a network update that a two-year deal has been finalized with Hackensack Meridian, so there will be no disruption in services.

Chair Mahr inquired about the April jump in correlation to Executive Director's report. Mr. Lodics explain that this is the data he was referring to, and while there was a spike in April, the medical trend is currently around 2%, which is favorable compared to the average medical trend of 6%.

**EXPRESS SCRIPTS:** There was no representative from Express Scripts present at the meeting, but the report is located on page 32.

# **OLD BUSINESS - None.**

**NEW BUSINESS –** Commissioner Ferrera highlighted ongoing issues with Express Scripts, particularly with the formulary and problem escalation. Although the issues seem resolved at first, they often recur, requiring employees to call again. This has become a burden, and the customer service has been less than ideal. Chair Mahr asked Mr. Lodics to follow up with Commissioner Ferrera to address the issue directly. Ms. Lazroe also offered to assist affected members, encouraging them to reach out for support.

Chair Mahr emphasized the importance of educating members, especially new ones, about the services Integrity's care advocates can provide. Ms. Lazroe agreed, noting that this support helps members avoid having to manage everything on their own.

### **PUBLIC COMMENT - None**

# MOTION TO ADJOURN:

MOVED: Commissioner Auger SECOND: Commissioner Hayes

VOTE: 4 ayes, 0 Nays

**MEETING ADJOURNED: 9:53am** 

NEXT MEETING: September 10, 2024 at 9:30am

Minutes prepared by:

Caitlin Perkins, Account Manager

# **APPENDIX II**

# Skylands Financial Committee Meeting September 10, 2024 at 10:00 AM Somerset County

Colleen Mahr, Chair
Brian Auger, Secretary
Dan Hayes, Executive Committee
Yvonne Childress, Treasurer
Brandon Lodics, Executive Director
Crystal Bailey, Program Manager
Caitlin Perkins, Account Manager

Ms. Bailey reviewed the Aetna Medical claims observation, noting that there was growth in the Fund. She highlighted the total medical paid amount did increase, total average length of stay decreasing, and office visits did increase by a small percentage. She anticipates the office visits to continue to increase as the year progresses. Ms. Bailey reviewed the top five conditions and hospitals within the Fund while also noting that emergency room visits did increase dramatically. She recommends continuous education on the use of in network provides and encourage members to have their annual and/or age-appropriate screenings to help decrease the number of emergency room visits. Additionally, she highlighted that mental health visits increased by over 100%. Chair Mahr requested to have the data broken down with in network providers versus out of network providers.

Ms. Bailey reviewed the high claimants, noting that there have been no reimbursable claims so far this year and the number of claims over specific individual reimbursement level did decline. Chair Mahr inquired that this is comparing the entire year of 2023 to the first half of 2024, which Ms. Bailey confirmed. Chair Mahr asked what is driving the increase of number of high claimants which Mr. Lodics noted that it could be the growth, natural inflation, but could dive into the data further to see if we can determine the drivers. Ms. Bailey stated that communications will be included with the open enrollment packets, reminding members to visit urgent care and primary doctors.

Chair Mahr asked if we should combine this data with the data from Integrity to compare their data to get a better understanding of the Funds urgent care usage. Mr. Lodics agreed since majority of plans no longer require a PCP for members and the trend is visit an urgent care instead of making an appointment with your primary.

Ms. Bailey reviewed the pharmacy claims data, noting the plan cost increased by 35%. She reviewed the top five conditions and drug categories. Chair Mahr asked if this is aligned with the market which Mr. Lodics pointed out this Fund is a better percentage than the market and most that he is experiencing. Ms. Bailey highlighted the weight loss drugs and noted that in the future, there is hope for a decline in medical claims due to these drugs helping other conditions. She reviewed the Encircle program, highlighting the purpose of this program is to decrease the number of people who are trying to use this as a short-term solution for weight loss.

Mr. Lodics apologized for his tardiness and appreciated the flexibility for the committee adjusting the agenda. Mr. Lodics reviewed the fast track for June which shows a moderate lost but noted this does not include the

reimbursements. Overall, he would consider this a break-even month once those reimbursements are completed. The ratios are also well, showing that the budget has been appropriate for this year.

Mr. Lodics echoed Ms. Baileys message that pharmacy is the main reason of the continuous loss being shown on the fast tracks, noting it was almost impossible to budget since this trend was unexpected to be so high. He noted that Zepbound was not in the utilization from last year which has become extremely popular in 2024. Additionally, cancer is another main driver. Chair Mahr asked about the surplus, Mr. Lodics noted a mild surplus but that does not include the true rebates.

Mr. Lodics then reviewed the executive summary of the budget presentation, highlighting the Actuary reviewed claims from January 2022 to June 2024 and created PEPM claims projection which is applied to the current census to create the claims projection. He noted that MRHIF is a projection due to the fact that the RFP has not been received, the legislative impact that is occurring with Medicare Advantage. Based on this renewal, we are recommending the Fund release an RFP to see if there is any opportunity to decrease this expected projection. He also stated for the expenses is a projected total since the Medical RFP was delayed at the pre-approval stage.

Mr. Lodics noted that the two main drivers are the pharmacy claims and Medical Advantage. He stated this should be a one-year correction for pharmacy claims. When reviewing the assessment by line cover, Mr. Lodics noted that we do not include the loss ratio adjustments by entity which can be done. He stated that each entity will have a different increase due to the line of coverages the entity has. Ms. Bailey commented that cancer drugs are shifting to pill form which will be more cost effective and that Humira is being removed from the formulary since there is a biosimilar available.

Mr. Lodics reviewed the five-year renewal trend, running at 5.4% which is operating under the market trend. He noted this is on the lower end of what is being seen in the Funds. Chair Mahr commented that the past five-years had COVID and the adjustment of people resuming appointing and increasing utilization, which is being reflected in the data.

Mr. Lodics suggested that there is an option to review the formulary and transfer the formulary over to the National Formulary. He warned Chair Mahr that this will cause disruption and PERMA will help navigate this. He also noted that there is an approval process for drugs that are not covered.

Chair Mahr requested to see the impact if the decision is made to move the formulary, Mr. Lodics stated that ESI can run this report but believes this may be a possibility. Mr. Lodics stated that we do not need to have a 1/1/25 update, we can have it later in quarter one of 2025. He also noted that the Actuary can update the budget as well. Additionally, the committee would be able to determine if this is a Fund wide change or if it could be optional for each entity.

Mr. Lodics closed the meeting by thanking the committee for their time and that PERMA will work on the materials requested at this meeting and schedule a zoom recap to review the different options.

# **APPENDIX III**



### IMPORTANT!

Your 2025 Benefit Payment Coupons Are Delayed

## RE: 2025 WEX Payment Coupon Book

Please be aware your 2025 payment coupon book will be delayed and will arrive after your January payment is due.

In order to maintain your coverage, you and your eligible dependents should continue to pay the 2024 payment for all applicable lines of coverage you receive through the Health Insurance Fund each month until your 2025 payment coupons arrive.

Shortly after you receive the 2025 payment coupon book, you will receive a reconciliation of your 2025 premium balance/credit. Upon receipt, please update your future payment amounts and include any owed balance.

If your monthly benefits are paid automatically (ACH), the 2024 payment may be deducted until the 2025 rate is available. When the new rate is available, the next ACH debit will include the new 2025 rate and the under/over payment from the prior month(s).

For Example: The 2024 Medical rate is \$50; the 2025, Medical rate is \$60

January Payment: \$50

February Payment: \$60 + \$10 = \$70

March Payment: \$60

#### NOTE: Your coverage will not be impacted!

If you have any questions about your 2025 payment coupons, please reach out to WEX at 877-837-5017.

Sincerely,

The Executive Director's Office



### IMPORTANT!

Your 2025 Benefit Payment Coupons Are Delayed

RE: Medicare Advantage Prescription Drug (MAPD) Plan Updates 2025 Inflation Reduction Act (IRA) Update

Effective January 1, 2025, the Centers for Medicare & Medicaid Services (CMS) has approved changes to the Inflation Reduction Act (IRA), including enhancements and changes to Part D plans. Increases to benefits and member protections represent the largest changes in the Part D program since it's inception. In addition, reductions in funding from CMS may result in premium increases to your Medicare Advantage Prescription Drug (MAPD) plan effective January 1, 2025. The change in the IRA reduces your member cost share, shifting more claim liability to the plan.

You will receive an annual notice relating to your MAPD plan from your carrier. The information will include your Summary of Benefits. Please review and contact your carrier with any benefit questions, using the telephone number on your ID card.

Note: There will not be a change to the benefits included in your current MAPD plan

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