

Gateway

BMED FUND



GATEWAY REGIONAL HEALTH INSURANCE FUND

AGENDA AND REPORTS

SEPTEMBER 24, 2024

FRANKLIN LAKES BOROUGH HALL

12:00 PM

OPEN PUBLIC MEETINGS ACT - In accordance with the Open Public Meetings Act, notice of this meeting was given by:

- I. sending sufficient notice to The Record and The Star Ledger
- II. filing advance written notice of this meeting with the Clerk/ Administrator of each member municipality and,
- III. posting notice on the Public Bulletin Board of all member municipalities.

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
AGENDA MEETING: SEPTEMBER 24, 2024
FRANKLIN LAKES BOROUGH HALL
12:00 PM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

PLEDGE OF ALLEGENCE

ROLL CALL OF 2024 EXECUTIVE COMMITTEE

- Gregory Hart, Chair
- Richard Kunze, Secretary
- Gregory Franz, Executive Committee
- Donna Gambutti, Executive Committee
- Bob Kakoleski, Executive Committee
- Anthony Ciannamea, Executive Committee
- Erin Delaney, Executive Committee Alternate
- James Gasparini, Executive Committee Alternate
- Thomas Padilla, Executive Committee Alternate
- Joe Voytus, Executive Committee Alternate

APPROVAL OF MINUTES: August 27, 2024 Open..... Appendix I

CORRESPONDENCE - None

MONTHLY COMMITTEE REPORTS

STRATEGIC PLANNING COMMITTEE - Rich Kunze, Chair

FINANCE/ADMINISTRATION COMMITTEE - Robert Kakoleski, Chair
- *September 17, 2024 Meeting Minutes - Appendix II*

WELLNESS COMMITTEE - Tom Padilla, Chair

SMALL CLAIMS COMMITTEE - Donna Gambutti, Chair

NOMINATION COMMITTEE - Anthony Ciannamea, Chair

NEW MEMBERS COMMITTEE - Gregory Franz, Chair

EXECUTIVE DIRECTOR - PERMA - Brandon Lodics

Executive Director's Report**Page 4**

BENEFITS CONSULTANT REPORT - Crystal Bailey

Conner Strong & Buckelew.....Page 13

ATTORNEY - Russell Huntington, Esq.

TREASURER - Joseph Iannaconi

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Treasurers Report August 2024

Confirmation of Claims Paid/Certification of Transfers

BOARD ADVISOR - Clark LaMendola

THIRD PARTY ADMINISTRATOR - Aetna - Jason Silverstein

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PRESCRIPTION PROVIDER - Express Scripts - Charles Yuk

Monthly Report.....Page 28

DENTAL ADMINISTRATOR - Delta Dental - Kim White

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CONSENT AGENDAPage 36

Resolution 28-24: 2025 Budget IntroductionPage 37

Resolution 29-24: September 2024 Bills ListPage 38

OLD BUSINESS

NEW BUSINESS

PUBLIC COMMENT

MEETING ADJOURNED

**Bergen Municipal Employee Benefits Fund
Executive Director's Report
September 24, 2024**

FINANCE AND OPERATIONS

PRO FORMA REPORTS

- **Fast Track Financial Reports** as of July 31, 2024 (page 6)
 - **Historical Income Statement**
 - **Ratios and Indices Report**

2025 BMED BUDGET - INTRODUCTION

The 2025 proposed budget and proposed assessments are on located on page 10 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 October 22, 2024, allowing for Open Enrollment to occur thereafter. Rate reports will by the end of September.

Resolution: 28-24 is in the Consent Agenda or can be moved separately.

Motion: *Motion to introduce the 2025 Bergen Municipal Employee Benefits Fund Budget in the amount of \$67,130,388 and to advertise a public hearing of the budget adoption on October 22, 2024.*

DIVIDEND

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

2025 PROFESSIONAL/CONSULTANT RFPs

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

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

MOTION: *Motion to allow the Contracts Committee to issue a bid request for Qualified Purchasing Agent for the Bergen Municipal Employee Benefits Fund for the remainder of 2024.*

MEDICARE ADVANTAGE - RFP

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

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

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND

FINANCIAL FAST TRACK REPORT

		AS OF		July 31, 2024			
		<i>THIS</i>		<i>YTD</i>		<i>FUND</i>	
		<i>MONTH</i>		<i>CHANGE</i>	<i>YEAR END</i>	<i>BALANCE</i>	
1.	UNDERWRITING INCOME	4,860,281		31,937,831		747,914,728	779,852,559
2.	CLAIM EXPENSES						
	Paid Claims	4,736,109		30,617,981		611,374,596	641,992,577
	IBNR	50,041		703,182		4,336,450	5,039,632
	Less Specific Excess	-		(65,164)		(16,263,655)	(16,328,819)
	Less Aggregate Excess	-		-		(602,911)	(602,911)
	TOTAL CLAIMS	4,786,150		31,255,998		598,844,480	630,100,478
3.	EXPENSES						
	MA & HMO Premiums	218,472		1,523,545		29,364,075	30,887,620
	Excess Premiums	124,799		824,832		34,417,793	35,242,625
	Administrative	286,931		1,692,795		57,893,549	59,586,344
	TOTAL EXPENSES	630,202		4,041,171		121,675,417	125,716,588
4.	UNDERWRITING PROFIT/(LOSS) (1-2-3)	(556,071)		(3,359,338)		27,394,831	24,035,493
5.	INVESTMENT INCOME	56,079		204,205		3,686,363	3,890,568
6.	DIVIDEND INCOME	-		-		7,518,953	7,518,953
7.	STATUTORY PROFIT/(LOSS) (4+5+6)	(499,993)		(3,155,133)		38,600,147	35,445,014
8.	DIVIDEND	-		-		29,523,154	July
STATUTORY SURPLUS (7-8+9)		(499,993)		(3,155,133)		9,076,993	5,921,861
SURPLUS (DEFICITS) BY FUND YEAR							
Closed	Surplus	83,323		(155,696)		9,350,153	9,194,457
	Cash	63,296		460,105		7,872,931	8,333,036
2023	Surplus	595		(328,536)		(273,160)	(601,696)
	Cash	(94,811)		(3,156,787)		2,488,509	(668,278)
2024	Surplus	(583,910)		(2,670,901)			(2,670,901)
	Cash	9,762		3,064,186			3,064,186
TOTAL SURPLUS (DEFICITS)		(499,993)		(3,155,133)		9,076,993	5,921,861
TOTAL CASH		(21,753)		367,504		10,361,440	10,728,944
CLAIM ANALYSIS BY FUND YEAR							
TOTAL CLOSED YEAR CLAIMS		(55,906)		273,136		560,330,952	560,604,088
FUND YEAR 2023							
	Paid Claims	73,374		4,768,312		34,177,078	38,945,390
	IBNR	(60,710)		(4,147,813)		4,336,450	188,637
	Less Specific Excess	-		(177,670)		-	(177,670)
	Less Aggregate Excess	-		-		-	-
	TOTAL FY 2023 CLAIMS	12,664		442,829		38,513,528	38,956,357
FUND YEAR 2024							
	Paid Claims	4,718,641		25,689,038			25,689,038
	IBNR	110,751		4,850,995			4,850,995
	Less Specific Excess	-		-			-
	Less Aggregate Excess	-		-			-
	TOTAL FY 2024 CLAIMS	4,829,392		30,540,033			30,540,033
COMBINED TOTAL CLAIMS		4,786,150		31,255,998		598,844,480	630,100,478

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.

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND									
RATIOS									
INDICES	2023	FY2024							
		JAN	FEB	MAR	APR	MAY	JUN	JUL	
Cash Position	10,361,441	\$ 10,755,617	\$ 10,233,547	\$ 9,963,433	\$ 10,628,533	\$ 10,869,111	\$ 10,750,697	\$ 10,728,944	
IBNR	4,336,450	\$ 3,956,447	\$ 3,851,089	\$ 4,438,200	\$ 4,723,942	\$ 4,887,740	\$ 4,989,591	\$ 5,039,632	
Assets	13,995,967	\$ 13,804,164	\$ 12,890,643	\$ 13,263,500	\$ 12,954,404	\$ 11,881,574	\$ 11,762,204	\$ 11,246,625	
Liabilities	4,918,973	\$ 4,391,005	\$ 4,274,204	\$ 4,840,541	\$ 5,112,278	\$ 5,250,477	\$ 5,340,350	\$ 5,324,764	
Surplus	9,076,994	\$ 9,413,159	\$ 8,616,439	\$ 8,422,959	\$ 7,842,127	\$ 6,631,097	\$ 6,421,854	\$ 5,921,861	
Claims Paid -- Month	3,980,289	\$ 3,485,651	\$ 4,323,347	\$ 3,726,835	\$ 4,555,147	\$ 5,162,645	\$ 4,628,247	\$ 4,736,109	
Claims Budget -- Month	3,160,967	\$ 3,375,529	\$ 3,365,898	\$ 4,214,827	\$ 4,224,158	\$ 4,230,490	\$ 4,246,102	\$ 4,254,710	
Claims Paid -- YTD	38,370,902	\$ 3,485,651	\$ 7,808,998	\$ 11,535,833	\$ 16,090,980	\$ 21,253,625	\$ 25,881,871	\$ 30,617,981	
Claims Budget -- YTD	37,095,915	\$ 3,375,529	\$ 6,741,428	\$ 10,956,254	\$ 15,180,413	\$ 19,448,044	\$ 23,694,146	\$ 27,943,558	
RATIOS									
Cash Position to Claims Paid	2.60	3.09	2.37	2.67	2.33	2.11	2.32	2.27	
Claims Paid to Claims Budget -- Month	1.26	1.03	1.28	0.88	1.08	1.22	1.09	1.11	
Claims Paid to Claims Budget -- YTD	1.03	1.03	1.16	1.1	1.1	1.1	1.1	1.10	
Cash Position to IBNR	2.39	2.72	2.66	2.24	2.25	2.22	2.15	2.13	
Assets to Liabilities	2.85	3.14	3.02	2.74	2.53	2.26	2.2	2.11	
Surplus as Months of Claims	2.87	2.79	2.56	2	1.86	1.57	1.51	1.39	
IBNR to Claims Budget -- Month	1.37	1.17	1.14	1.05	1.12	1.16	1.18	1.18	

**Bergen Municipal Employee Benefits Fund
2024 Budget Report
as of July 31, 2024**

	Cumulative	Annualized	Latest filed	Cumulative Expensed	\$ Variance	% Variance
Expected Losses						
Medical Claims Aetna	24,446,033	43,191,971	32,881,902	26,028,442	(1,582,410)	-6%
Prescription Claims	3,237,914	5,554,547	5,957,942	3,269,188	(1,002,649)	-44%
Prescription Formulary Rebates	(971,375)	(1,666,366)	(1,787,383)	Included Above in Prescription Claims		
Dental Claims	1,230,987	2,117,753	2,090,604	1,242,402	(11,416)	-1%
Subtotal	27,943,558	49,197,905	39,143,065	30,540,033	(2,596,475)	-9%
HMO/DMO Premiums	17,798	30,453	46,598	13,389	4,408	25%
Medicare Advantage / EGWP	1,442,435	2,473,303	2,162,509	1,510,155	(67,720)	-5%
Reinsurance						
Specific	825,190	1,449,757	1,195,147	824,832	358	0%
Total Loss Fund	30,228,981	53,151,418	42,547,319	32,888,410	(2,659,429)	-9%
Loss Fund Contingency	75,216	128,942	128,942	0	75,216	0%
Expenses						
Legal	15,167	26,000	26,000	15,085	81	1%
Treasurer	12,535	21,488	21,488	12,530	5	0%
Administrator	269,532	464,460	448,496	269,310	223	0%
Risk Management Consultants	622,728	1,111,325	900,459	622,723	6	0%
TPA - Claims Agent Aetna	455,699	800,606	693,002	456,665	(967)	0%
Dental TPA	55,738	95,965	95,190	55,688	50	0%
Actuary	11,025	18,900	18,900	9,450	1,575	14%
Auditor	11,200	19,200	19,200	11,200	-	0%
Benefits Consultant	243,643	425,286	363,502	243,613	31	0%
Board Advisor	11,143	19,102	19,102	9,000	2,143	19%
Subtotal Expenses	1,708,410	3,002,332	2,605,339	1,705,263	3,147	0%
Miscellaneous and Special Services						
Misc/Cont	11,083	19,000	19,000	11,755	(671)	-6%
Wellness, Disease, Case Management	72,917	125,000	125,000	12,333	60,583	83%
Affordable Care Act Taxes	6,198	10,888	8,976	10,884	(4,686)	-76%
A4 Surcharge	18,646	32,503	34,542	15,383	3,263	17%
Plan Documents	3,792	6,500	6,500	3,792	-	0%
Claims Audit	23,333	40,000	40,000	0	23,333	100%
Subtotal Misc/Sp Svcs	135,968	233,891	234,018	54,146	81,822	60%
Total Expenses	1,844,378	3,236,223	2,839,357	1,759,409	84,969	5%
Total Budget	32,148,575	56,516,583	45,515,618	34,647,819	(2,499,244)	-8%

Bergen Municipal Employee Benefits Fund
CONSOLIDATED BALANCE SHEET

AS OF JULY 31, 2024

BY FUND YEAR

	BMED 2024	BMED 2023	CLOSED YEAR	FUND BALANCE
ASSETS				
Cash & Cash Equivalents	3,064,186	(668,278)	8,333,036	10,728,944
Assesments Receivable (Prepaid)	(1,882,800)	70,658	-	(1,812,142)
Interest Receivable	9,680	8,390	23,875	41,945
Specific Excess Receivable	-	177,670	1,109,981	1,287,651
Aggregate Excess Receivable	-	-	-	-
Dividend Receivable	-	-	-	-
Prepaid Admin Fees	-	-	-	-
Other Assets	1,000,228	-	-	1,000,228
Total Assets	2,191,293	(411,559)	9,466,891	11,246,625
LIABILITIES				
Accounts Payable	-	0	-	0
IBNR Reserve	4,850,995	188,637	-	5,039,632
A4 Retiree Surcharge	-	-	-	-
Dividends Payable	-	-	211,690	211,690
Retained Dividends	-	-	60,743	60,743
Accrued/Other Liabilities	11,200	1,500	-	12,700
Total Liabilities	4,862,195	190,137	272,432	5,324,764
EQUITY				
Surplus / (Deficit)	(2,670,901)	(601,696)	9,194,459	5,921,861
Total Equity	(2,670,901)	(601,696)	9,194,459	5,921,861
Total Liabilities & Equity	2,191,293	(411,559)	9,466,891	11,246,625
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.

Bergen Municipal Employee Benefits Fund				Print Date:	
2025 Proposed Budget				9/19/2024 15:53	
Census:		Monthly	Annual		
Medical Aetna		1,751	21,012	2446.247906	
Rx		873	10,476	672.9557083	
Dental		2,410	28,920	75.00051867	
Medicare Advantage - Medical		618	7,416		
Rx No Medical (Incl in Rx above)		22	264		
Dental Only (Incl in Dental above)		1,289	15,468		
Medicare Advantage - Only (Incl above)		401	4,812		
DMO Only		41	492		
LINE ITEMS	Annualized Budget FY2024	Proposed Budget FY2025	\$ Change	% Change	
1 Medical Claims Aetna	\$ 45,099,911	\$ 51,400,561	\$ 6,300,650	13.97%	
2 Prescription Claims	\$ 5,583,850	\$ 7,049,884	\$ 1,466,034	26.25%	
3 Prescription Formulary Rebates	\$ (1,675,155)	\$ (2,114,965)	\$ (439,810)	26.25%	
4 Dental Claims	\$ 2,128,094	\$ 2,169,015	\$ 40,921	1.92%	
5					
6 Subtotal Claims	\$ 51,136,700	\$ 58,504,495	\$ 7,367,795	14.41%	
7					
8 HMO/DMO Premiums	\$ 30,381	\$ 30,381	\$ -	0.00%	
9					
10 Medicare Advantage / EGWP	\$ 2,488,028	\$ 3,110,050	\$ 622,022	25.00%	
11					
12 Reinsurance					
13 Specific	\$ 1,504,459	\$ 1,805,351	\$ 300,892	20.00%	
14					
15 Total Loss Fund	\$ 55,159,568	\$ 63,450,277	\$ 8,290,709	15.03%	
16					
17 Loss Fund Contingency	\$ 128,942	\$ 220,516	\$ 91,574	71.02%	
18					
19 Expenses					
20 Legal	\$ 26,000	\$ 26,520	\$ 520	2.0%	
21 Treasurer	\$ 21,488	\$ 21,918	\$ 430	2.0%	
22 Administrator	\$ 468,415	\$ 477,783	\$ 9,368	2.0%	
23 Risk Management Consultants	\$ 1,183,821	\$ 1,183,821	\$ -	0.0%	
24 TPA - Claims Agent Aetna	\$ 830,814	\$ 872,355	\$ 41,541	5.0%	
25 Dental TPA	\$ 96,593	\$ 96,593	\$ -	0.0%	
26 Actuary	\$ 18,900	\$ 19,278	\$ 378	2.0%	
27 Auditor	\$ 19,200	\$ 19,584	\$ 384	2.0%	
28 Benefits Consultant	\$ 437,791	\$ 446,547	\$ 8,756	2.0%	
29 Board Advisor	\$ 19,102	\$ 19,484	\$ 382	2.0%	
30					
31 Subtotal Expenses	\$ 3,122,124	\$ 3,183,883	\$ 61,759	1.98%	
32					
33 Miscellaneous and Special Services					
34 Misc/Cont	\$ 19,000	\$ 19,000	\$ -	0.00%	
35 Wellness, Disease, Case Management	\$ 125,000	\$ 100,000	\$ (25,000)	-20.00%	
36 Affordable Care Act Taxes	\$ 11,299	\$ 11,299	\$ -	0.00%	
37 A4 Surcharge	\$ 86,254	\$ 98,913	\$ 12,659	14.68%	
38 Plan Documents	\$ 6,500	\$ 6,500	\$ -	0.00%	
39 Claims Audit	\$ 40,000	\$ 40,000	\$ -	0.00%	
40 Subtotal Misc/Sp Svcs	\$ 288,053	\$ 275,712	\$ (12,341)	-4.28%	
41					
42 Total Expenses	\$ 3,410,177	\$ 3,459,595	\$ 49,418	1.45%	
43					
44 Total Budget	\$ 58,698,687	\$ 67,130,388	\$ 8,431,701	14.36%	
45 Dividend Application*	\$ 191,293	\$ -	\$ (191,293)	-100.00%	
46 Budget Excl Dividend	\$ 507,394	\$ 67,130,388	\$ 8,622,994	14.74%	

Bergen Municipal Employee Benefits Fund						
ASSESSMENT COMPARISON FY2024 vs. FY2025						
		Annualized Assessment FY2024	Proposed Assessment FY2025	Difference \$	Difference %	
	Group Name	Total	Total	Total	Total	
4386	Edgewater	\$ 3,821,676	\$ 4,460,160	\$ 638,484	16.71%	
3919	Fairfield	\$ 3,246,000	\$ 3,805,848	\$ 559,848	17.25%	
3923	Fairfield BOE	\$ 2,360,700	\$ 2,729,364	\$ 368,664	15.62%	
11525	Fanwood Township	\$ 1,371,180	\$ 1,604,508	\$ 233,328	17.02%	
1791	Franklin Lakes	\$ 2,204,079	\$ 2,557,008	\$ 352,929	16.01%	
1416	Ft. Lee	\$ 11,367,882	\$ 12,926,532	\$ 1,558,650	13.71%	
10455	City of Garfield	\$ 6,004,600	\$ 6,845,076	\$ 840,476	14.00%	
11561	Garwood	\$ 1,203,108	\$ 1,406,244	\$ 203,136	16.88%	
11986	Midland Park	\$ 1,113,576	\$ 1,298,400	\$ 184,824	16.60%	
1422	Montvale	\$ 866,892	\$ 997,464	\$ 130,572	15.06%	
1420	Moonachie	\$ 1,756,344	\$ 2,034,288	\$ 277,944	15.83%	
1782	Oakland	\$ 2,750,916	\$ 3,191,220	\$ 440,304	16.01%	
1423	Park Ridge	\$ 2,385,564	\$ 2,783,712	\$ 398,148	16.69%	
1424	Ridgefield Park	\$ 2,877,156	\$ 3,344,076	\$ 466,920	16.23%	
1426	Rutherford	\$ 3,588,732	\$ 4,168,596	\$ 579,864	16.16%	
1427	Saddle River	\$ 1,067,424	\$ 1,235,016	\$ 167,592	15.70%	
1428	South Hackensack	\$ 1,094,580	\$ 1,268,376	\$ 173,796	15.88%	
4432	Verona	\$ 3,072,528	\$ 3,531,096	\$ 458,568	14.92%	
1429	Wallington	\$ 1,746,288	\$ 2,034,504	\$ 288,216	16.50%	
1432	Westwood	\$ 1,683,996	\$ 1,937,796	\$ 253,800	15.07%	
9572	Woodcliff Lake	\$ 1,462,176	\$ 1,698,720	\$ 236,544	16.18%	

Dental Only:

	Annualized Assessment FY2024	Proposed Assessment FY2025	Difference \$	Difference %
Group Name	Total	Total	Total	Total
Alpine	\$ 36,192	\$ 37,368	\$ 1,176	3.25%
Carlstadt	\$ 215,340	\$ 221,844	\$ 6,504	3.02%
Carlstadt Board of Education	\$ 62,052	\$ 63,912	\$ 1,860	3.00%
East Rutherford	\$ 127,476	\$ 130,488	\$ 3,012	2.36%
East Rutherford Board of Education	\$ 157,152	\$ 161,700	\$ 4,548	2.89%
Emerson	\$ 75,924	\$ 78,180	\$ 2,256	2.97%
Hillsdale	\$ 50,940	\$ 52,404	\$ 1,464	2.87%
Lodi	\$ 176,100	\$ 181,488	\$ 5,388	3.06%
Maywood Borough	\$ 73,500	\$ 75,516	\$ 2,016	2.74%
Mine Hill	\$ 12,228	\$ 12,588	\$ 360	2.94%
North Arlington	\$ 80,160	\$ 82,632	\$ 2,472	3.08%
Rochelle Park	\$ 74,940	\$ 77,208	\$ 2,268	3.03%
Wanaque Valley Regional S.A.	\$ 12,924	\$ 13,344	\$ 420	3.25%

REGULATORY

**BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
YEAR: 2024**

<u>Yearly Items</u>	<u>Filing Status</u>
<input type="checkbox"/> Budget	2024 Filed
<input type="checkbox"/> Assessments	2024 Filed
<input type="checkbox"/> Actuarial Certification	2024 Filed
<input type="checkbox"/> Reinsurance Policies	Filed
<input type="checkbox"/> Fund Commissioners	Filed at Reorg
<input type="checkbox"/> Fund Officers	Filed at Reorg
<input type="checkbox"/> Renewal Resolutions	Filed at Reorg
<input type="checkbox"/> Indemnity and Trust	In process
<input type="checkbox"/> New Members (list)	N/A
<input type="checkbox"/> Withdrawals	N/A
<input type="checkbox"/> Risk Management Plan and By Laws	Filed at Reorg
<input type="checkbox"/> Cash Management Plan	Filed at Reorg
<input type="checkbox"/> Unaudited Financials	3/31/2024 Filed
<input type="checkbox"/> Annual Audit	Pending approval
<input type="checkbox"/> Budget Changes	N/A
<input type="checkbox"/> Transfers	N/A
<input type="checkbox"/> Additional Assessments	N/A
<input type="checkbox"/> Professional Changes	N/A
<input type="checkbox"/> Officer Changes	N/A
<input type="checkbox"/> Risk Management Plan Changes	N/A
<input type="checkbox"/> Bylaw Amendments	N/A
<input type="checkbox"/> Benefit Changes (list)	N/A
<input type="checkbox"/> Other	N/A

**Gateway-BMED Health Insurance Fund
Benefits Consultant Report**

September 2024

Benefits Consultant: Conner Strong & Buckelew

Online Enrollment Training: HIFtraining@permainc.com

Enrollments/Eligibility/Billing: bmedenrollments@permainc.com

Brokers: brokerservice@permainc.com

ELIGIBILITY/ENROLLMENT:

Please direct any eligibility, enrollment, or system related questions to our dedicated BMED enrollment team. To contact the team, email BMEDenrollments@permainc.com or fax to 856-685-2248.

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

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

COVERAGE UPDATES:

Onsite Flu Vaccine Clinic Vendor List

Approved onsite flu vaccine clinic vendors list are included as a supplement attachment to the consent agenda. BMED 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 6/22/24)

In 2Q2024, the BMED Fund has saved \$165,268 for members enrolled in SaveOn, an additional \$55,113 in savings from 1Q2024. There are currently 31 participants in the program, an increase of 2 members compared to 1Q2024. In 2024, BMED members who used SaveOn saved a total of \$7,426 in copays. The average savings per prescription to date is \$1,589. See supplement attachment for full report.

Top 5 Therapeutic Categories:

- Inflammatory Conditions
 - 17 members, totaling \$80,042 in savings
- Asthma & Allergy
 - 10 members, totaling \$46,803 in savings
- Cancer
 - 2 members, totaling \$31,900 in savings
- Multiple Sclerosis
 - 1 member, totaling \$558
- Cystic Fibrosis
 - 1 member, totaling \$5,964

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 Benefit Consultant team has provided ESI with an updated letter template for the new plan year in preparation of the mailing.

Encircle Program (GLP-1 Weight Loss)

Effective September 1, 2024:

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

Effective January 1, 2025:

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

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

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

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

OPERATIONAL UPDATES:

Open Enrollment - 1/1/25 (Passive)

- BMED OE will be held October 21st through November 1st
- All OE updates should be completed in WEX by November 8th to allow time for ID cards to be delivered to members by 1/1/24
- 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
- OE guides are currently being updated and will be sent once finalized

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

2024 LEGISLATIVE REVIEW: None

Medical and Rx Reporting: None

No Surprise Billing and Transparency Act- Continued Delays

The Health Insurance Funds, including Gateway-BMED 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 Gateway-BMED 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 Executive Director’s contract, the HIFs has acquired the services of AIM to conduct specialized audits for BMED Fund. AIM will begin to complete audits for the Mental Health Parity and Addiction Equity Act (MHPAEA) and No Surprises Act (NSA) requirements. Aim will review plan language and Aetna’s NQTL analysis performed for the BMED to determine compliance with the MHPAEA. Aim will review BMED claims to determine if Aetna is adjudicating claims in accordance with the requirements and mandates of the No Surprises Act.

BMED audit began April 22, 2024.

Aim will review Gene Therapy cost for the BMED Fund, confirming the claims carrier is administering the necessary care management programs specific to Gene Therapy.

Appeals

Carrier Appeals: None

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
08/28/2024	Medical/Aetna	BMED 2024 08 01	Anesthesia	Overtured	09/04/2024

IRO Submissions: None

BMED Small Claims Committee Appeals: None

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND

BILLS LIST

Resolution No. _____

AUGUST 2024

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

BE IT RESOLVED that the Bergen Municipal Employee Benefit Fund's Executive Board, hereby authorizes the Fund treasurer to issue warrants in payment of the following claims; and

FURTHER, that this authorization shall be made a permanent part of the records of the Fund.

FUND YEAR 2024

<u>VendorName</u>	<u>Comment</u>	<u>InvoiceAmount</u>
INSPIRA FINANCIAL HEALTH, INC	MONTHLY HSA FEE- S HACKENSACK 07/24	15.00
INSPIRA FINANCIAL HEALTH, INC	MONTHLY HSA-BORO MONTVALE 07/24	105.00
INSPIRA FINANCIAL HEALTH, INC	MONTHLY HSA-BORO OAKLAND 07/24	3.00
INSPIRA FINANCIAL HEALTH, INC	HSA FEES-BOR WALLINGTON 07/24	71.07
		194.07
PERMA	ADMIN FEES 08/24	39,056.84
PERMA	POSTAGE 07/24	128.51
		39,185.35
HUNTINGTON BAILEY, LLP	ATTORNEY FEES 08/24	2,167.00
		2,167.00
JOSEPH IANNAICONI JR.	TREASURER FEE 08/24	1,790.00
		1,790.00
ACCESS	INV 10928949 DEPT 418 5/31/24	203.54
		203.54
Acrisure NJ Partners Ins. Services, LLC	BROKER FEES 08/24	1,096.12
		1,096.12
Acrisure NJ Partners Ins. Services, LLC	BROKER FEES- 08/24	14,409.70
		14,409.70
Acrisure NJ Partners Ins. Services, LLC	BROKER FEES 08/24	44,301.21
		44,301.21
GJEM INSURANCE AGENCY INC	BROKER FEES 08/24	5,955.00
		5,955.00
COMPETITIVE ADVANTAGE BENEFITS LLC	BROKER FEES 08/24	3,646.50
		3,646.50
WORLD INSURANCE ASSOCIATES, LLC	BROKER FEES 08/24	6,798.50
		6,798.50
MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 08/24	124,727.20
		124,727.20
	CHECK TOTAL	244,474.19
AETNA HEALTH MANAGMENT, LLC	MEDICARE ADVANTAGE 08/24	141,348.01
		141,348.01
FLAGSHIP DENTAL PLANS	E. RUTHER. DENT. PREM.- ID 16- 8/1/24	1,456.95
FLAGSHIP DENTAL PLANS	DENT. PREM. -RUTHERFORD- ID 695 8/1/24	1,074.79
		2,531.74
AETNA	MEDICAL TPA 08/24	68,878.68
		68,878.68

DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA 08/24	8,049.40
		8,049.40
CONNER STRONG & BUCKELEW	BENEFITS CONSULTANT FEES 08/24	36,374.80
CONNER STRONG & BUCKELEW	PLAN DOCS 08/24	541.67
		36,916.47
FAIRVIEW INSURANCE AGENCY ASSOCIATES	BROKER FEES 08/24	4,397.16
		4,397.16
THE VOZZA AGENCY	BROKER FEES 08/24	7,443.78
		7,443.78
ALLEN ASSOCIATES	BROKER FEES 08/24	9,785.08
		9,785.08
	ACH TOTAL	279,350.32
	Total Payments FY 2024	523,824.51
	TOTAL PAYMENTS ALL FUND YEARS	523,824.51

Chairperson

Attest:

Dated: _____

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

Treasurer

**BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
SUPPLEMENTAL BILLS LIST**

Resolution No. _____

AUGUST 2024

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

BE IT RESOLVED that the Bergen Municipal Employee Benefit Fund's Executive Board, hereby authorizes the Fund treasurer to issue warrants in payment of the following claims; and

FURTHER, that this authorization shall be made a permanent part of the records of the Fund.

FUND YEAR 2024

<u>VendorName</u>	<u>Comment</u>	<u>InvoiceAmount</u>
ACTUARIAL SOLUTIONS, LLC	ACTUARY FEES Q3 2024	4,725.00
		4,725.00
	Total Payments FY 2024	4,725.00
	TOTAL PAYMENTS ALL FUND YEARS	4,725.00

Chairperson

Attest:

Dated: _____

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

Treasurer

Bergen Municipal Employee Benefits Fund

SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED

Current Fund Year: 2024											
Month Ending: July											
	Medical	Dental	Rx	Vision	Run-In	Reinsurance	RSR	Admin	Dividend Retain	Metro Interfund	TOTAL
OPEN BALANCE	8,022,562.73	203,315.39	(2,822,085.05)	0.00	0.00	38,256.23	102,518.84	4,443,518.81	60,410.18	1,396,817.54	11,445,314.67
RECEIPTS											
Assessments	4,365,352.86	187,593.96	358,655.23	0.00	0.00	136,878.11	11,942.81	271,361.76	0.00	0.00	5,331,784.73
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Invest Pymnts	53,992.26	573.25	0.00	0.00	0.00	152.90	289.05	12,528.56	170.33	0.00	67,706.35
Invest Adj	32.41	0.34	0.00	0.00	0.00	0.09	0.17	7.51	0.10	0.00	40.62
Subtotal Invest	54,024.67	573.59	0.00	0.00	0.00	152.99	289.22	12,536.07	170.43	0.00	67,746.97
Other *	38,818.47	1,469.33	193,417.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	233,705.58
TOTAL	4,458,196.00	189,636.88	552,073.01	0.00	0.00	137,031.10	12,232.03	283,897.83	170.43	0.00	5,633,237.28
EXPENSES											
Claims Transfers	4,341,442.74	183,550.88	672,895.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,197,889.06
Expenses	263,640.31	2,923.46	0.00	0.00	0.00	124,798.80	0.00	554,181.37	0.00	0.00	945,543.94
Other *	15,941.08	0.00	0.00	0.00	0.00	0.00	0.00	786.70	0.00	0.00	16,727.78
TOTAL	4,621,024.13	186,474.34	672,895.44	0.00	0.00	124,798.80	0.00	554,968.07	0.00	0.00	6,160,160.78
END BALANCE	7,859,734.60	206,477.93	(2,942,907.48)	0.00	0.00	50,488.53	114,750.87	4,172,448.57	60,580.61	1,396,817.54	10,918,391.17

SUMMARY OF CASH AND INVESTMENT INSTRUMENTS										
Bergen Municipal Employee Benefits Fund										
ALL FUND YEARS COMBINED										
CURRENT MONTH		July								
CURRENT FUND YEAR		2024								
Description:		CHECKING	JCMI	CLAIMS	UHC CLAIMS	TD Invest				
ID Number:										
Maturity (Yrs)										
Purchase Yield:										
TOTAL for All Accts & instruments										
Opening Cash & Investment Balance	\$11,445,314.74	4,990,935.41	2,913,791.01	-	0	3540588.32				
Opening Interest Accrual Balance	\$46,513.33	-	-	-	0	46513.33				
1	Interest Accrued and/or Interest Cost	\$12,472.65	\$0.00	\$0.00	\$0.00	\$0.00	\$12,472.65			
2	Interest Accrued - discounted Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			
3	(Amortization and/or Interest Cost)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			
4	Accretion	\$40.64	\$0.00	\$40.64	\$0.00	\$0.00	\$0.00			
5	Interest Paid - Cash Instr.s	\$38,474.97	\$29,996.63	\$6,088.70	\$0.00	\$0.00	\$2,389.64			
6	Interest Paid - Term Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			
7	Realized Gain (Loss)	\$29,231.38	\$0.00	\$27,898.61	\$0.00	\$0.00	\$1,332.77			
8	Net Investment Income	\$80,219.64	\$29,996.63	\$34,027.95	\$0.00	\$0.00	\$16,195.06			
9	Deposits - Purchases	\$5,549,549.23	\$5,549,549.23	\$0.00	\$0.00	\$0.00	\$0.00			
10	(Withdrawals - Sales)	-\$6,144,219.70	-\$6,143,433.00	-\$319.36	\$0.00	\$0.00	-\$467.34			
	Ending Cash & Investment Balance	\$10,918,391.26	\$4,427,048.27	\$2,947,499.60	\$0.00	\$0.00	\$3,543,843.39			
	Ending Interest Accrual Balance	\$58,985.98	\$0.00	\$0.00	\$0.00	\$0.00	\$58,985.98			
	Plus Outstanding Checks	\$449,579.50	\$449,579.50	\$0.00	\$0.00	\$0.00	\$0.00			
	(Less Deposits in Transit)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			
	Balance per Bank	\$11,367,970.76	\$4,876,627.77	\$2,947,499.60	\$0.00	\$0.00	\$3,543,843.39			

CERTIFICATION AND RECONCILIATION OF CLAIMS PAYMENTS AND RECOVERIES

Bergen Municipal Employee Benefits Fund

Month	July									
Current Fund Year	2024									
Policy Year	Coverage	1.	2.	3.	4.	5.	6.	7.	8.	
		Calc. Net Paid Thru Last Month	Monthly Net Paid July	Monthly Recoveries July	Calc. Net Paid Thru July	TPA Net Paid Thru July	Variance To Be Reconciled	Delinquent Unreconciled Variance From	Change This Month	
2024	Medical	17,399,776.77	4,066,490.58	0.00	21,466,267.35	0.00	21,466,267.35	17,399,776.77	4,066,490.58	
	Dental	936,711.95	181,124.38	0.00	1,117,836.33	0.00	1,117,836.33	936,711.95	181,124.38	
	Rx	3,990,969.96	672,895.44	0.00	4,663,865.40	0.00	4,663,865.40	3,990,969.96	672,895.44	
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Total	22,327,458.68	4,920,510.40	0.00	27,247,969.08	0.00	27,247,969.08	22,327,458.68	4,920,510.40	
2023	Medical	38,049,099.83	71,565.03	0.00	38,120,664.86	0.00	38,120,664.86	38,049,099.83	71,565.03	
	Dental	1,977,048.44	1,809.00	0.00	1,978,857.44	0.00	1,978,857.44	1,977,048.44	1,809.00	
	Rx	7,147,359.23	0.00	0.00	7,147,359.23	0.00	7,147,359.23	7,147,359.23	0.00	
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Total	47,173,507.50	73,374.03	0.00	47,246,881.53	0.00	47,246,881.53	47,173,507.50	73,374.03	
2022	Medical	3,937,862.57	0.00	0.00	3,937,862.57	0.00	3,937,862.57	3,937,862.57	0.00	
	Dental	99,631.56	0.00	0.00	99,631.56	0.00	99,631.56	99,631.56	0.00	
	Rx	166,527.52	0.00	0.00	166,527.52	0.00	166,527.52	166,527.52	0.00	
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Total	4,204,021.65	0.00	0.00	4,204,021.65	0.00	4,204,021.65	4,204,021.65	0.00	
Closed Year	Medical	536,128.42	(57,130.16)	0.00	478,998.26	0.00	478,998.26	536,128.42	(57,130.16)	
	Dental	1,393.21	0.00	0.00	1,393.21	0.00	1,393.21	1,393.21	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	537,521.63	(57,130.16)	0.00	480,391.47	0.00	480,391.47	537,521.63	(57,130.16)	
Metro 2022	Medical	29,786,648.93	248,446.32	0.00	30,035,095.25	0.00	30,035,095.25	29,786,648.93	248,446.32	
	Dental	448,449.83	617.50	0.00	449,067.33	0.00	449,067.33	448,449.83	617.50	
	Rx	394,254.07	0.00	0.00	394,254.07	0.00	394,254.07	394,254.07	0.00	
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Total	30,629,352.83	249,063.82	0.00	30,878,416.65	0.00	30,878,416.65	30,629,352.83	249,063.82	
Metro 2022	Medical	(793,714.35)	0.00	0.00	(793,714.35)	0.00	(793,714.35)	(793,714.35)	0.00	
	Dental	2,727.45	0.00	0.00	2,727.45	0.00	2,727.45	2,727.45	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	(790,986.90)	0.00	0.00	(790,986.90)	0.00	(790,986.90)	(790,986.90)	0.00	
Metro Clos	Medical	(57,245.00)	12,070.97	0.00	(45,174.03)	0.00	(45,174.03)	(57,245.00)	12,070.97	
	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	(57,245.00)	12,070.97	0.00	(45,174.03)	0.00	(45,174.03)	(57,245.00)	12,070.97	
0	Medical	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Dental	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	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	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
0	Medical	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	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	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
TOTAL		104,023,630.39	5,197,889.06	0.00	109,221,519.45	0.00	109,221,519.45	104,023,630.39	5,197,889.06	

BMED Delinquency Report		
	July	Aug
Alpine		
Carlstadt		
Carlstadt Board of Education		
East Rutherford		
East Rutherford Board of Education		
Edgewater		
Emerson		
Fairfield		
Fairfield BOE	450.00	
Fanwood		
Franklin Lakes		
Ft. Lee		
Garfield City		
Garwood		
Hillsdale		
Lodi		
Maywood Borough		
Midland Park		
Mine Hill		
Montvale		
Moonachie		-
North Arlington		
Oakland		-
Park Ridge		
Ridgefield Park		
Rochelle Park		
Rutherford		
Saddle River		
South Hackensack		82,282.00
Verona		
Wallington		-
Wanaque Valley Regional S.A.		
Westwood		
Woodcliff Lake		26,888.00
Wood-Ridge		



BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND

Monthly Claim Activity Report

September 24, 2024



BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND

	MEDICAL CLAIMS PAID 2023			MEDICAL CLAIMS PAID 2024		
	# OF EES	PER EE	# OF EES	PER EE		
JANUARY	\$ 2,471,010	1,287	\$ 1,920	\$ 3,482,808	1,435	\$ 2,427
FEBRUARY	\$ 1,815,151	1,338	\$ 1,357	\$ 2,807,632	1,438	\$ 1,952
MARCH	\$ 2,146,796	1,317	\$ 1,630	\$ 3,552,020	1,738	\$ 2,044
APRIL	\$ 1,983,801	1,313	\$ 1,511	\$ 4,109,194	1,733	\$ 2,371
MAY	\$ 2,885,649	1,346	\$ 2,144	\$ 3,986,669	1,734	\$ 2,299
JUNE	\$ 2,581,178	1,339	\$ 1,928	\$ 3,857,794	1,742	\$ 2,215
JULY	\$ 2,438,426	1,398	\$ 1,744	\$ 4,593,550	1,740	\$ 2,640
AUGUST	\$ 3,262,140	1,383	\$ 2,359			
SEPTEMBER	\$ 2,276,634	1,382	\$ 1,647			
OCTOBER	\$ 3,163,584	1,382	\$ 2,289			
NOVEMBER	\$ 2,649,809	1,381	\$ 1,919			
DECEMBER	\$ 3,149,926	1,389	\$ 2,268			
TOTALS	\$30,824,102					
				2024 Average	1,651	\$ 2,278
				2023 Average	1,355	\$ 1,893

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

Plan Sponsor Unique ID : All
Customer: BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
Group / Control: 00866353,00880725,SI283129

Paid Dates: 07/01/2024 - 07/31/2024
Service Dates: 01/01/2011 - 07/31/2024
Line of Business: All

	Paid Amt
	\$133,301.53
	\$103,872.00
Total:	\$237,173.53



Bergen Municipal Employee Benefit Fund

8/1/2023 thru 7/31/24 (unless otherwise noted)

Dashboard

Medical Claims Paid:

January 2024 – July 2024

Total Medical Paid per EE: **\$2,278**

NOTE: ***Report no longer includes Metro unless otherwise noted***

Network Discounts

Inpatient:	59.4%
Ambulatory:	67.4%
Physician/Other:	65.3%
TOTAL:	64.8%

Provider Network

% Admissions In-Network:	97.3%
% Physician Office:	87.3%

Aetna Book of Business:

Admissions 98.0%; Physician 91.4%

Top Facilities Utilized (by total Medical Spend)

- Hackensack University
- Morristown Medical Center
- Cooperman Barnabas Medical
- Valley Hospital
- Englewood Hospital

Catastrophic Claim Impact

January 2024- July 2024

Number of Claims Over \$50,000: **118**
 Claimants per 1000 members: **29.8**
 Avg. Paid per Claimant: **\$123,011**
 Percent of Total Paid: **45.0%**

- Aetna BOB- HCC account for an average of 45.4% of total Medical Cost

Aetna One Flex Member Outreach: Through July 2024

Total Members Identified: **973**
 Members Targeted for 1:1 Nurse Support : **277**
 Members Targeted for Digital Activity: **746**
 Member 1:1 outreach completed: **215**
 Member 1:1 Outreach in Progress: **12**

Teladoc Activity

January 2024 – July 2024

(*BMED/Metro)

Total Registrations: **97**
 Total Online Visits: **145**
 Total Net Claims Savings: **\$70,868**
 Total Visits w/ Rx: **113**

Mental Health Visits: **25**
 Dermatology Visits: **12**

Service Center Performance Goal Metrics YTD 2024

Customer Service Performance

1st Call Resolution:	93.92%
Abandonment Rate:	0.7%
Avg. Speed of Answer:	23.5 sec

Claims Performance

Financial Accuracy:	99.16%*
---------------------	----------------

*Q1 2024

90% processed w/in:	6.4 days
95% processed w/in:	11.2 days

Claims Performance (Monthly) (June 2024)

90% processed w/in:	5.7 days
95% processed w/in:	9.2 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



EXPRESS SCRIPTS®

Bergen Municipal Employee Benefits Fund - Monthly Utilization Tracking Report

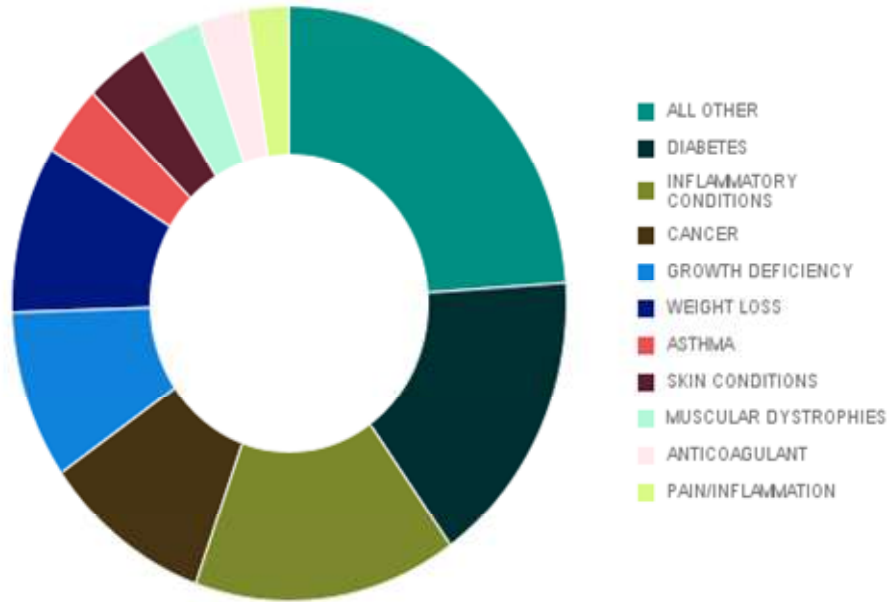
Total Component/ Date of Service (Month)	2023 01	2023 02	2023 03	2023 Q1	2023 04	2023 05	2023 06	2023 Q2	2023 07	2023 08	2023 09	2023 Q3	2023 10	2023 11	2023 12	2023 Q4	2023 YTD
Membership	2,899	2,996	2,995	2,963	2,989	3,101	3,350	3,147	3,499	3,483	3,487	3,490	3,463	3,451	3,459	3,458	3,264
Total Days	119,700	118,151	129,496	367,347	123,253	134,202	132,963	390,418	136,929	134,887	125,048	396,864	138,050	132,455	133,680	404,185	1,558,814
Total Patients	1,213	1,227	1,318	1,879	1,262	1,314	1,284	1,952	1,347	1,341	1,315	2,057	1,389	1,417	1,416	2,134	2,782
Total Plan Cost	\$564,288	\$481,739	\$600,198	\$1,646,225	\$632,375	\$629,648	\$569,637	\$1,831,659	\$760,914	\$747,948	\$702,026	\$2,210,889	\$842,205	\$659,151	\$746,328	\$2,247,683	\$7,936,456
Generic Fill Rate (GFR) - Total	83.4%	84.9%	84.3%	84.2%	86.5%	85.6%	85.8%	86.0%	86.3%	85.6%	82.3%	84.8%	80.2%	84.4%	84.1%	82.9%	84.4%
Plan Cost PMPM	\$194.65	\$160.79	\$200.40	\$185.18	\$211.57	\$203.05	\$170.04	\$194.03	\$217.47	\$214.74	\$201.33	\$211.18	\$243.20	\$191.00	\$215.76	\$216.69	\$202.61
Total Specialty Plan Cost	\$275,695	\$186,987	\$248,667	\$711,349	\$336,037	\$269,636	\$196,609	\$802,282	\$425,645	\$372,854	\$327,019	\$1,125,518	\$442,447	\$284,828	\$341,545	\$1,068,820	\$3,707,969
Specialty % of Total Specialty Plan Cost	48.9%	38.8%	41.4%	43.2%	53.1%	42.8%	34.5%	43.8%	55.9%	49.9%	46.6%	50.9%	52.5%	43.2%	45.8%	47.6%	46.7%

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	2,842	2,836	2,826	2,835	2,835	2,833	2,839	2,836	2,838								
Total Days	116,437	100,707	111,469	328,613	112,091	109,271	107,376	328,738	115,419								
Total Patients	1,201	1,157	1,174	1,804	1,160	1,145	1,123	1,742	1,167								
Total Plan Cost	\$629,932	\$657,588	\$563,768	\$1,851,288	\$852,154	\$671,429	\$698,012	\$2,221,595	\$714,517								
Generic Fill Rate (GFR) - Total	86.7%	85.8%	87.0%	86.5%	84.9%	85.5%	85.7%	85.3%	84.6%								
Plan Cost PMPM	\$221.65	\$231.87	\$199.49	\$217.70	\$300.58	\$237.00	\$245.87	\$261.15	\$251.77								
% Change Plan Cost PMPM	13.9%	44.2%	-0.5%	17.6%	42.1%	16.7%	44.6%	34.6%	15.8%								
Total Specialty Plan Cost	\$325,080	\$342,746	\$251,147	\$918,973	\$498,617	\$274,672	\$333,084	\$1,106,373	\$301,800								
Specialty % of Total Specialty Plan Cost	51.6%	52.1%	44.5%	49.6%	58.5%	40.9%	47.7%	49.8%	42.2%								

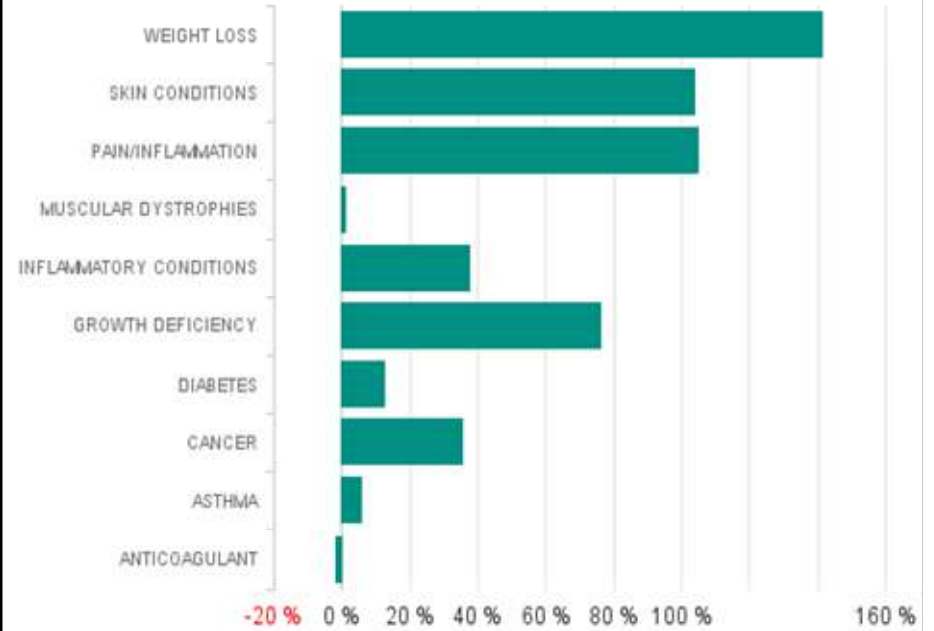
Top Indications

BERGEN MUNICIPAL EMP BENEFITS (Current Period 01/2024 - 07/2024 vs. Previous Period 01/2023 - 07/2023) Peer = Government - National Preferred Formulary

Top Indications by Plan Cost



Plan Cost PMPM Trend



			Current Period						Previous Period						Trend
Rank	Peer Rank	Indication	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Plan Cost PMPM
1	1	DIABETES	21.3 %	2,160	\$775,080	\$39.05	30.3 %	25.8 %	26.2 %	2,463	\$758,443	\$34.74	32.9 %	28.7 %	12.4 %
2	2	INFLAMMATORY CONDITIONS	20.2 %	196	\$734,484	\$37.00	41.3 %	33.7 %	20.4 %	241	\$589,037	\$26.98	52.3 %	39.5 %	37.1 %
3	3	CANCER	13.0 %	124	\$472,564	\$23.81	78.2 %	75.9 %	13.3 %	140	\$384,231	\$17.60	75.7 %	78.0 %	35.3 %
4	8	GROWTH DEFICIENCY	12.0 %	57	\$437,769	\$22.05	0.0 %	0.0 %	9.5 %	48	\$273,714	\$12.54	0.0 %	0.0 %	75.9 %
5	4	WEIGHT LOSS	12.0 %	414	\$436,725	\$22.00	3.6 %	5.2 %	6.9 %	186	\$198,988	\$9.12	8.6 %	10.5 %	141.4 %
6	6	ASTHMA	5.1 %	999	\$184,370	\$9.29	78.1 %	87.9 %	6.7 %	1,285	\$192,494	\$8.82	75.0 %	79.0 %	5.3 %
7	5	SKIN CONDITIONS	4.9 %	440	\$177,044	\$8.92	82.7 %	85.5 %	3.3 %	425	\$95,556	\$4.38	84.7 %	88.2 %	103.8 %
8	10	MUSCULAR DYSTROPHIES	4.7 %	10	\$169,567	\$8.54	20.0 %	35.2 %	6.4 %	11	\$184,415	\$8.45	0.0 %	0.7 %	1.1 %
9	7	ANTICOAGULANT	3.7 %	308	\$135,572	\$6.83	15.6 %	19.2 %	5.2 %	360	\$151,823	\$6.96	15.0 %	22.1 %	-1.8 %
10	9	PAIN/INFLAMMATION	3.3 %	1,391	\$118,363	\$5.96	98.2 %	99.1 %	2.2 %	1,581	\$63,649	\$2.92	97.4 %	98.8 %	104.5 %
Total Top 10				6,099	\$3,641,538	\$183.46	55.9 %	62.4 %		6,740	\$2,892,350	\$132.50	59.0 %	64.4 %	38.5 %

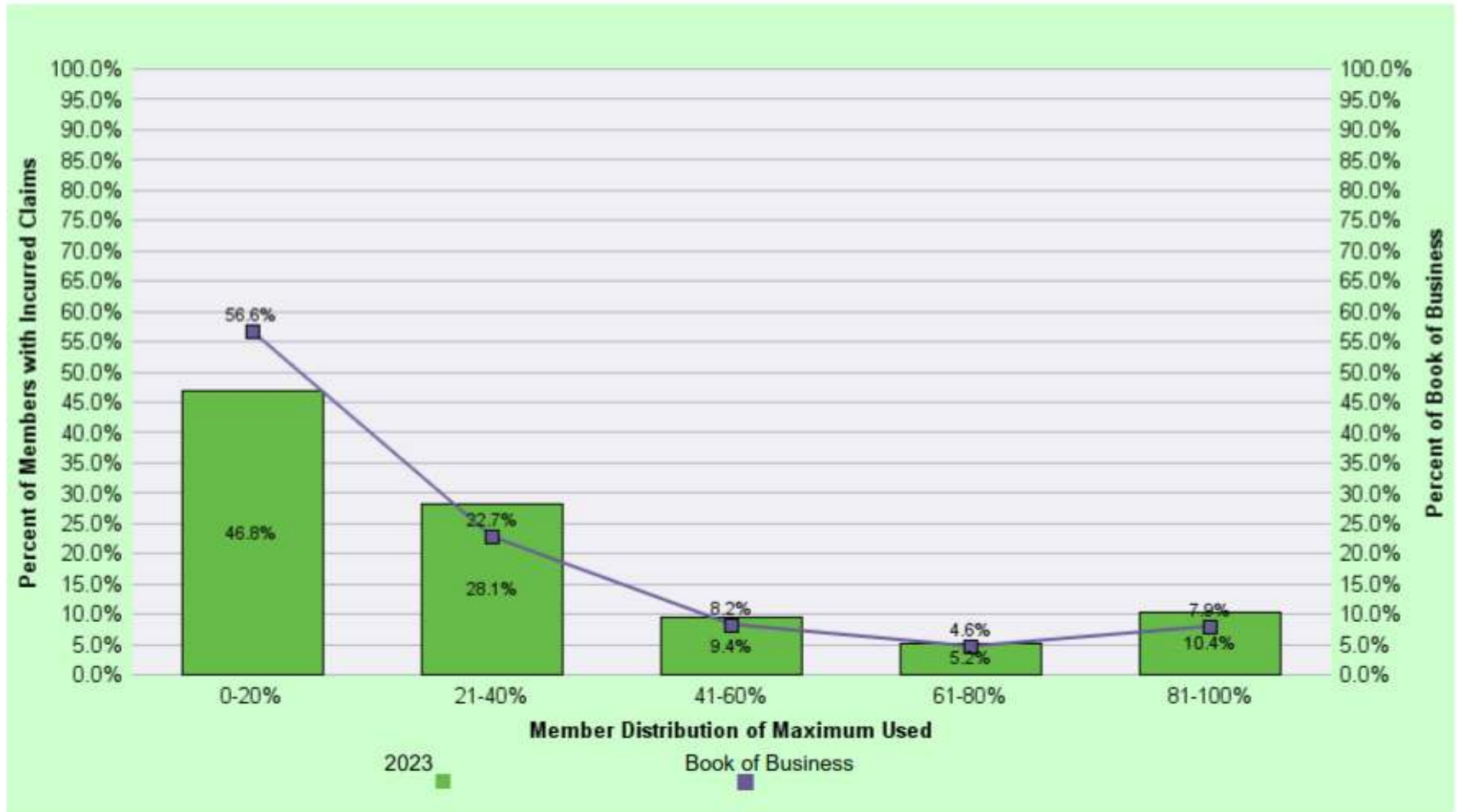
Top Drugs

BERGEN MUNICIPAL EMP BENEFITS (Current Period 01/2024 - 07/2024 vs. Previous Period 01/2023 - 07/2023) 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	1	OZEMPIC	DIABETES	N	316	54	\$272,324	\$13.72	220	43	\$186,702	\$8.55	60.4 %
2	11	WEGOVY	WEIGHT LOSS	N	215	50	\$264,531	\$13.33	137	36	\$166,478	\$7.63	74.7 %
3	100	POMALYST	CANCER	Y	8	1	\$178,869	\$9.01	7	1	\$144,561	\$6.62	36.1 %
4	6	STELARA	INFLAMMATORY CONDITIONS	Y	14	2	\$175,878	\$8.86	12	2	\$114,919	\$5.26	68.3 %
5	2	MOUNJARO	DIABETES	N	176	29	\$172,350	\$8.68	69	13	\$64,474	\$2.95	194.0 %
6	293	EMFLAZA	MUSCULAR DYSTROPHIES	Y	10	1	\$169,567	\$8.54	11	1	\$184,415	\$8.45	1.1 %
7	16	ZEPBOUND	WEIGHT LOSS	N	176	46	\$167,146	\$8.42	NA	NA	NA	NA	NA
8	158	OMNITROPE	GROWTH DEFICIENCY	Y	21	3	\$146,157	\$7.36	4	1	\$34,038	\$1.56	372.2 %
9	15	TREMFYA	INFLAMMATORY CONDITIONS	Y	24	3	\$130,535	\$6.58	6	2	\$36,513	\$1.67	293.2 %
10	79	GENOTROPIN	GROWTH DEFICIENCY	Y	20	3	\$124,488	\$6.27	24	4	\$121,606	\$5.57	12.6 %
11	24	ENBREL SURECLICK	INFLAMMATORY CONDITIONS	Y	21	3	\$119,089	\$6.00	12	2	\$56,696	\$2.60	131.0 %
12	213	MEKINIST	CANCER	Y	9	1	\$111,029	\$5.59	7	1	\$82,815	\$3.79	47.4 %
13	12	DUPIXENT PEN	SKIN CONDITIONS	Y	27	4	\$98,742	\$4.97	15	3	\$36,279	\$1.66	199.3 %
14	143	NGENLA	GROWTH DEFICIENCY	Y	9	1	\$87,933	\$4.43	NA	NA	NA	NA	NA
15	115	NUCALA	ASTHMA	Y	15	2	\$83,480	\$4.21	14	2	\$67,598	\$3.10	35.8 %
16	603	SOGROYA	GROWTH DEFICIENCY	Y	7	1	\$79,191	\$3.99	NA	NA	NA	NA	NA
17	10	JARDIANCE	DIABETES	N	129	20	\$70,443	\$3.55	119	21	\$63,458	\$2.91	22.1 %
18	26	ELIQUIS	ANTICOAGULANT	N	131	28	\$68,808	\$3.47	155	32	\$77,286	\$3.54	-2.1 %
19	42	XARELTO	ANTICOAGULANT	N	129	20	\$64,981	\$3.27	151	25	\$72,184	\$3.31	-1.0 %
20	431	DICLOFENAC SODIUM	PAIN/INFLAMMATION	N	71	30	\$64,501	\$3.25	49	27	\$10,130	\$0.46	600.3 %
21	28	TALTZ AUTOINJECTOR	INFLAMMATORY CONDITIONS	Y	13	2	\$64,163	\$3.23	9	1	\$46,806	\$2.14	50.8 %
22	235	TAFINLAR	CANCER	Y	6	1	\$59,653	\$3.01	9	1	\$94,687	\$4.34	-30.7 %
23	64	SKYRIZI	INFLAMMATORY CONDITIONS	Y	9	1	\$56,009	\$2.82	NA	NA	NA	NA	NA
24	62	HUMIRA(CF)	INFLAMMATORY CONDITIONS	Y	9	1	\$53,998	\$2.72	9	1	\$47,999	\$2.20	23.7 %
25	210	WELIREG	CANCER	Y	3	1	\$53,617	\$2.70	NA	NA	NA	NA	NA
Total Top 25					1,568		\$2,937,483	\$147.99	1,039		\$1,709,643	\$78.32	89.0 %



Plan Maximum Utilization versus Book of Business



Everyone Deserves a Healthy Smile

Hearing Savings Program FAQ



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

How can I check my hearing?

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

- Virtual screening¹—allows you to confirm if hearing loss is detected from the comfort of home with the help of an Amplifon care advocate.
- In-person hearing evaluation at an Amplifon network clinic near you. A hearing care professional will complete an in-depth evaluation of your hearing and propose solutions if hearing loss is detected.

What hearing aid options are available?

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

How can I pay for hearing aids?

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



Amplifon savings

Amplifon saves members an average of 68% off MSRP.²



Financing

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



HSA, HRA, FSA

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

What does your hearing savings program powered by Amplifon include?



Custom hearing solutions

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



Risk-free trial³

Find your right fit by trying your hearing aids for 60 days. 100% money-back guarantee if not completely satisfied, no return or restocking fees.




Continuous care⁴

Follow-up care to ensure a smooth transition, a charging station or supply of batteries, and a warranty for loss, repairs, or damage.



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7-2024

Hearing Savings Program

	Level ①	Level ②	Level ③	Level ④	Level ⑤
	Hearing aid options from the top brands with average savings of 68% off MSRP.**				
Amplifon Member Price (per ear)	\$995/ear	\$1,295/ear	\$1,495/ear	\$1,895/ear	\$2,195/ear
	Virtual services Virtual screening†—determine need from the comfort of home Personalized coaching—enhance adjustment and use of hearing aids On-demand virtual visits—convenient care for non-clinical support 60-day risk-free trial Find your right fit by trying your hearing aids risk-free Complimentary aftercare 1-year follow-up care—ensures smooth transition to your new hearing aids 2-year battery support—battery supply or charging station to keep you powered 3-year warranty—coverage for loss, repairs, or damage				

Take the first step:

Call 888-232-3439 | TTY: 711 | Hours: Mon-Fri 8am - 8pm ET

Visit: DeltaDentalNJ.com/Hearing

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

**Based on 2024 internal pricing analysis. Your savings may vary.

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

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



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7-2024

**BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
CONSENT AGENDA
SEPTEMBER 24, 2024**

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

Resolutions

Subject Matter

Resolution 28-24: 2025 Budget IntroductionPage 42
Resolution 29-24: September 2024 Bills ListPage ##

Motion _____

Second _____

RESOLUTION NO. 28-24

**BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
INTRODUCTION OF THE 2025 PROPOSED BUDGET**

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

WHEREAS, a quorum of the Executive Committee met on September 24, 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 **\$67,130,388** shall be held at the Fund's regularly scheduled and advertised meeting of October 22, 2024 to be held at Franklin Lakes Borough at 12:00 noon. The 2025 budget shall be considered for adoption at a second reading at that time and after the completion of a public hearing.

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

ADOPTED: September 24, 2024

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

RESOLUTION NO. 29-24

**BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
APPROVAL OF THE SEPTEMBER 2024 BILLS LISTS**

WHEREAS, the **Bergen Municipal Employee Benefits Fund** held a Public Meeting on **September 24, 2024** for the purposes of conducting the official business of the Fund; and

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

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

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

ADOPTED: September 24, 2024

BY: _____
CHAIRPERSON

ATTEST:

SECRETARY

APPENDIX I

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
OPEN MEETING: AUGUST 27, 2024
FRANKLIN LAKES BOROUGH
12:00 P.M.

Meeting called to order by Secretary Kunze. The Open Public Meeting Notice was read into the record.

ROLL CALL OF 2024 EXECUTIVE COMMITTEE

Gregory Hart	Chair	Absent
Richard Kunze	Secretary	Present
Gregory Franz	Executive Committee	Present
Donna Gambutti	Executive Committee	Absent
Bob Kakoleski	Executive Committee	Present
Anthony Ciannamea	Executive Committee	Present
Erin Delaney	Executive Committee Alternate	Absent
James Gasparini	Executive Committee Alternate	Absent
Thomas Padilla	Executive Committee Alternate	Present
Joseph Voytus	Executive Committee Alternate	Present

APPOINTED OFFICIALS PRESENT:

Executive Director/ Administrator	PERMA Risk Management Services	Emily Koval Caitlin Perkins
Attorney	Huntington Bailey, LLP	Bill Bailey
Treasurer	Joseph Iannaconi	Present
Third Party Administrator	Aetna	Jason Silverstein
Dental Claims Administrator	Delta Dental of NJ, Inc.	Amy Lehrer
Auditor	Lerch, Vinci & Higgins	Liz Schick
Actuary	John Vataha	Absent
Independent Consultant	LaMendola Associates	Present
Benefits Consultant	Conner Strong	Crystal Bailey
RX Administrator	Express Scripts	Charles Yuk
Wellness Coordinator	Civitas	Absent

OTHERS PRESENT:

Frank Covelli, World Insurance
 Melissa Librizzi, City of Garfield
 Lisa Sabato, World
 Renee Gear, World
 Evelyn Scott, South Hackensack

Brittany Vozza, Vozza Agency
 Cindy Kirpatrick, Saddle River
 Matthew McArrow, RMC

APPROVAL OF MINUTES: June 18, 2024

MOTION: Commissioner Kakoleski
SECOND: Commissioner Franz
ROLL CALL VOTE: All in Favor

CORRESPONDENCE - None

COMMITTEE REPORTS:

Strategic Planning - No report.

Administration and Finance Committee - Commissioner Kakoleski summarized the meeting where claim trends were reviewed, highlighting that the cost and enrollment are increasing so a deeper dive for the numbers will be completed to get a deeper understanding of the trends and how they are impacting the Fund. Additionally, he noted continued education about in network vs out of network will help keep the claims data down. Commissioner Kakoleski noted the pharmacy data does include METRO data, so the numbers are a little skewed but the GLP-1s are a major driver. He noted that another meeting is scheduled, which the Fund Actuary will be attending, before the next meeting that will allow the breakdown of the claims data to be presented and get a better understanding of the proposed budget. Ms. Bailey commented that the METRO data will be able to be removed to provide a better break down of the Fund's pharmacy claims.

Wellness Committee - Commissioner Padilla mentioned during the wellness meeting, it was discussed to connect with the Risk Managers to get their input on the current wellness components. He stated there is a handful that expressed interest and will be planning on meeting after Labor Day. Additionally, he stated that Marianne agreed to stay on longer until we find a replacement and the importance to increase collaboration between entities to learn about different wellness programs to help engage more employees. Commissioner Kunze questioned on how long Marianne's willing to stay on and Ms. Koval noted that the contract ends at the end of the year. Commissioner Padilla stated there are big shoes to fill and we will be focusing on finding a replacement.

Small Claims Committee - Ms. Bailey noted that there is an additional item that was approved by the committee, which she will provide more detail during the Program Manager's report.

Nominations Committee - No report.

New Members Committee - No report.

EXECUTIVE DIRECTOR'S REPORT

FAST TRACK FINANCIAL REPORT - The Executive Director reviewed the financial fast track for June 2024, reiterating the points Commissioner Kakoleski made during the finance committee report and noting that those reports will be shared with the committee. She highlighted that this month's loss was primarily driven by prescription claims, with weight loss and cancer drugs continuing to be major factors and mentioned that cancer drugs are transitioning from infusion treatments to pill form, which is costly.

MRHIF - Executive Director reviewed the approval of the Data Warehouse, Cedar Gate. The contract will start on April 1, 2025, and we were able to budget for this. Executive Director noted the possibilities of this vendor will help with customized report for ROI for wellness, predictive modeling, and actuarial trends. In response to Commissioner Kakoleski question about the contract start date, Executive Director noted there is five-year historical data that will be implemented. Commissioner Kunze commented that the price is underbudget.

BUDGET UPDATE - Executive Director confirmed that PERMA continues to work on gathering more data, noting the market check for ESI was recently released and the Hackensack Meridian negotiations that went into effect on July 1, 2024 which the Fund Actuary will provide a projection for that general impact. The two committee members that are in attendance will provide availability for end of September to go into more depth. Executive Director noted that we will be prepared to introduce in September if the committee chooses to recommend the budget.

Commissioner Kunze clarified the current year-to-date loss is currently and Executive Director confirmed that it is primarily from Fund year 2024 and a little loss from 2023 which is when the weight loss drugs began gaining traction. Additionally, she noted there is additional cash that was left on BMED books, where their claims run out is starting to end. Hoping to have a recommendation of sending over the remainder of those Funds to leave some buffer.

BILLING POLICY - Executive Director noted the one action item that was pulled at the last meeting was reviewing the billing policy, noting the reason it was pulled was the late fee portion. After further review, the 10% is not industry standards and recommended a 2% fee, which the Fund Attorney agreed on. The language was adjusted to ensure that this fee will not be installed if there are outlier issues but more focused on the groups that are chronically not paying. Commissioner Kunze opened the floor for discussion.

The Fund Attorney noted the goal was not to make it punitive but encourage people to pay on time while having the flexibility with certain circumstances, especially those that are beyond people's control. Commissioner Kakoleski questioned who would make the final call on imposing the fee which Executive Director stated a recommendation between PERMA and the Fund Treasurer to the Executive Committee which would make the final decision.

Commissioner Kunze commented that this has been discussed for an extended period and the focus of those chronic late payers to get their attention. The vetting process with the Attorney and professional staff then coming to the Executive Committee for review is appropriate. Fund Attorney stated we are here for the members, we are an insurance Fund, not company, so our approach is to work with the members. Commissioner Kunze agrees with the language and noted the language provides that balance we were looking for.

RFP UPDATES -

Health Cooperative System -Executive Director noted the Medial TPA RFP is still out there which is experiencing delays so we are pulling the Medical Advantage RFP will be sent out at the Fund level. The QPA has requested, based on the attention from the OSC, that the shared services agreement

Since the Resolution was not included in the agenda, the Fund Attorney did agree a vocal vote and memorial it at the next meeting. Commissioner Kunze questioned any fee that is associated, Executive Director noted there is not since he is at the MRHIF level.

MOTION TO APPROVE SHARED SERVICE AGREEMENT FOR QPA, SEAN CANNING, BETWEEN MRHIF AND BMED FUND

MOTION:	Commissioner Kakoleski
SECOND:	Commissioner Kunze
VOTE:	6 Ayes, 0 Nays

BENEFIT CONSULTANTS REPORT: Ms. Bailey reviewed the following report items covered in the agenda.

ELIGIBILITY/ENROLLMENT:

Please direct any eligibility, enrollment, or system related questions to our dedicated BMED enrollment team. To contact the team, email BMEDenrollments@permainc.com or fax to 856-685-2248.

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

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

COVERAGE UPDATES: None

EXPRESS-SCRIPTS UPDATE:

Mail Order Drug Removal

Effective August 19th, 2024, ESI will no longer dispense the drugs on the list on page 13 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.

In response to Commissioner Franz inquiry on why this is occurring, Mr. Yuk mentioned that it is cost effective to remove this program since there is not a lot of utilization. Mr. Yuk noted that this is the second phase of the mail order drug removal. Ms. Bailey also mentioned there was approximately only 50 members enrolled in this program at the MRHIF level.

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 Benefit Consultant team has provided ESI with an updated letter template for the new plan year in preparation of the mailing.

Effective September 1, 2024:

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

Effective January 1, 2025:

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

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

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

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

OPERATIONAL UPDATES: None

2024 LEGISLATIVE REVIEW: None

Medical and Rx Reporting: None

No Surprise Billing and Transparency Act- Continued Delays

The Health Insurance Funds, including Gateway-BMED 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 Gateway-BMED 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 Executive Director’s contract, the HIFs has acquired the services of AIM to conduct specialized audits for BMED Fund. AIM will begin to complete audits for the Mental Health Parity and Addiction Equity Act (MHPAEA) and No Surprises Act (NSA) requirements. Aim will review plan language and Aetna’s NQTL analysis performed for the BMED to determine compliance with the MHPAEA. Aim will review BMED claims to determine if Aetna is adjudicating claims in accordance with the requirements and mandates of the No Surprises Act. **BMED audit began April 22, 2024.**

Aim will review Gene Therapy cost for the BMED Fund, confirming the claims carrier is administering the necessary care management programs specific to Gene Therapy.

Appeals

Carrier Appeals: None

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
06/27/2024	Medical/Aetna	BMED 2024 06 02	Anesthesia	Upheld	07/23/2024

IRO Submissions: None

BMED Small Claims Committee Appeals: None

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
06/27/2024	Medical/Aetna	BMED 2024 06 02	Anesthesia	Upheld	07/23/2024

Commissioner Kunze clarified this was an extension of a previous claim that was approved by the small claims committee and Ms. Bailey confirmed, stating that the member was unaware until the Anesthesia reached out with a separate bill which is not uncommon.

Executive Director asked Commissioner Kunze if the strategic planning committee would be best to review and Commissioner Kunze agreed.

FUND ATTORNEY - Fund Attorney noted his office will handle the Benefit Consultant and Executive Director responses.

TREASURER - Treasurer reviewed the July bills list and the reports.

Commissioner Ciannamea questioned the surcharge on the bills list and the Executive Director responded to clarify these are the retirees that the State covers them and confirmed they pay their claims.

BOARD ADVISOR- Mr. LaMendola did have a question about the provision of the requirements for the Encircle program about the required amount of weight loss that needs to occur. Ms. Bailey noted that there has to be a 5% of starting rate. Mr. LaMendola voiced his concern from a clinical view about how there may be patients that are taking these medications but not capable of losing the weight in the standards that the program has identified. Ms. Bailey commented that this medication has been approved for only weight loss so if that is not taking place, the doctor should review and look at over possible avenues. Mr. LaMendola suggested getting a statement from a physician that this program is the correct avenue. Ms. Bailey noted that in discussions with other risk managers, this is not an abnormal program. Mr. Yuk also stated that there were multiple physicians' that vetted this program out and taking a more conservative approach to decrease disruption. Mr. LaMendola appreciated the additional information but believes the Fund records should indicate there is clinical support that this is being taken place. Commissioner Kakoleski commented that this is not for only BMED but for all Funds.

AETNA - Jason Silverstien reviewed the claims through June. He stated there were two high claimants for the month of May and high claimant for the month of June. Mr. Silverstein apologized for the oversight of the dashboard, which was provided as a printed attachment at the meeting but noted that the dashboard metrics continue to perform well.

EXPRESS SCRIPTS - Mr. Yuk reviewed the report included the agenda, highlighting the Q2 percent change plan cost PMPM, which is comparing Q2 for 2024 with Q2 for 2023. Mr. Yuk noted the uniqueness of the BMED data, such as Muscular Dystrophies and Growth Deficiencies. He highlighted the continue increase of weight loss, diabetes and cancer drugs being main drivers. Mr. Yuk mentioned that Humira will be excluded from the formulary and recommend the biosimilar drug which should provide some relief.

In response to Commissioner Kunze's inquiry of the market trend, Mr. Yuk stated that he is seeing the main factors are similar across the Fund but there are some unique conditions that do vary in each Fund. Mr. Yuk noted that ESI is constantly reviewing this and how can we improve financially without causing a big member disruption.

DELTA DENTAL – There is a report in the agenda, but no one is in attendance.

CONSENT AGENDA:

MOTION TO APPROVE CONSENT AGENDA INCLUDING THE FOLLOWING RESOLUTIONS:

Revised Resolution 8-24: Risk Management Plan
Resolution 26-24: Small Claims Decision Ratification
Resolution 27-24: July and August 2024 Bills List

MOTION:	Commissioner Padilla
SECOND:	Commissioner Ciannamea
VOTE:	6 Ayes, 0 Nays

OLD BUSINESS: None

NEW BUSINESS: None

MOTION TO ENTER PUBLIC COMMENT:

Ms. Renee Gear had a question regarding the Humira being removed from the formulary, Mr. Yuk confirmed that January 1, 2025 will be the date this goes into effect but noted that anyone who is currently on the drug has until June 1, 2025 to give them six months to work with their physician's to come up with alternative solution. Ms. Gear requested a list of members that would be affected by group and Ms. Bailey said we could only provide the number of members and confirmed that the members affected will get communications sent out.

Ms. Evelyn Scott voiced her concerns on the new language for the billing late fees since their current process typically takes longer than 45 days. She stated this is putting a lot of pressure on the groups since it will not be a realistic timeline for their group. Additionally, Ms. Scott provided that their town is not looking to pay late but it's just due to the timeline and meeting schedules and imposing a 2% fee is not realistic if there are adjustments needed for the bill.

Ms. Bailey commented that this is special circumstance, and that communication of the tentative pay date will be helpful. Additionally, PERMA requests bills to be paid if there are any incorrections and adjustments will be processed on the following months bill.

Commissioner Kakoleski clarified that they are not paying their bills until they are receiving the contributions from their employees and Ms. Scott confirmed that is the process. Commissioner Kunze stated that a discussion with Ms. Scott will be held at the end of this meeting to discuss some ideas that the group may want to take into consideration.

Commissioner Kunze also commented that the delinquency report format will be changed moving forward since the August bills are not concerned as delinquent.

Frank Covelli thanked Ms. Crystal Bailey publicly because she has been doing above and beyond and have been extremely helpful.

MOTION TO ADJORN:

MOTION:

Commissioner Kakoleski

SECOND:

Commissioner Franz

VOTE:

Unanimous

MEETING ADJOURNED: 12:55 pm

NEXT MEETING: SEPTEMBER 24, 2024

Caitlin Perkins, Account Manager

APPENDIX II

BMED Administration and Finance Committee Meeting
September 17, 2024

TEAMS, 2:00 pm

Robert Kakoleski, Committee Chair

Greg Hart, Fund Chair

Richard Kunze, Committee Member

John Vataha, Fund Actuary

Ray Burke, Fund Underwriter

Brandon Lodics, Executive Director

Crystal Bailey, Program Manager

Emily Koval, Associate Executive Director

Caitlin Perkins, Account Manager

Mr. Lodics opened the meeting to review the Executive Summary of the 2025 Budget. He said that the State is seeing very similar increases, and other Funds across the State. The claims fund is about 94% of the budget. The Claims through June 2024 were sent to the Actuary last month. The actuary then delivers a per employee per month fee for all claim lines, based upon the current enrollment. We also take out stop loss reimbursements for now and going forward. Mr. Vataha said that he will also go through any anomalies that may change his projection, such as big jumps in enrollment or an increase in one line of coverage. He said year over year want the true numbers. Mr. Lodics said that Hackensack would be one of these anomalies because of the unknown increase in that contract with Aetna.

Mr. Lodics said the medical is about +15% while prescription is +26% which is seen across the State. There are inflammatory and cancer that are also impacting the prescription, but the weight loss drugs are a large impact. The ESI Level Care contract has a market check that was just performed, and we were able gain an credit for that contract. There is an inflammatory drug that will be excluded next year that will bring down costs because the member must use the biosimilar. In addition, the Omada program for the weight loss drugs will help reduce the increase.

Mr. Lodics said that the MRHIF will be meeting early October to introduce so the number in the budget is a placeholder. Medicare Advantage is a big-ticket item, as well because of the inflation protection act which helps the user. The 'donut hole' of about \$2000 is now closed, along with other changes that impact the plan payor and not the member. We are seeing that the State is having similar increases. We would like to go out to RFP, but not expecting great changes. In response to Commissioner Kakoleski, Mr. Lodics said that the cost will be reduced for the retiree and would be passed to the payor. There are other parts of the legislation that shifts the cost. He said there is a little bit of loss fund contingency but does not make a large difference to the overall budget.

In response to Commissioner Kakoleski, Mr. Lodics said that the shift cost from the cancer drugs and weight loss drugs from medical to prescription would not be immediate. There are some early

studies showing improvement in some conditions. Mr. Burke said that there is not a lot of migration, you'll just benefit for the healthier individuals. Mr. Vataha said he is skeptical of the long-term effects of these drugs because you need a longer period of time to watch these trends. Commissioner Hart said it would be difficult to verify at the BMED level. Mr. Lodics said that mental health and elective surgeries are also up across the State, which could be the true COVID make up. Mr. Vataha agreed that this is across multiple states and multiple insured arrangements and this hypothesis is popular. There was also a reset of the wage setting at the provider and facility level.

Ms. Bailey reviewed the claim comparison by line of coverage that was included in the agenda packet. In response to Commissioner Kakoleski, Mr. Lodics said that the claims are strictly paid, and no high claimant reimbursements are considered so some may be seemed higher than how the Fund is running. In response to Commissioner Hart, Ms. Bailey said that overall increases are per 1000 member, or a per employee per month so growth is considered. She notated the total claims that received reimbursement over the specific limit. Next year, the Fund will likely increase that level. In response to Commissioner Hart, Ms. Bailey explained the difference between the two compared time frames which are not the same number of months. Ms. Bailey to take back the comparison of the overall paid amounts compared to the two-time frame. Mr. Lodics said that these numbers do confirm that a lot of these claimants are under the specific limit which hopefully is not trend. Mr. Lodics said that the Fund is not privy to an exact amount of the Hackensack deal but know that it is mid-single digits. Commissioner Hart said the surgery costs are increasing significantly.

Commissioner Kakoleski said he will be working with his benefits consultant to offer plan design changes. Mr. Lodics said that the Medicare Advantage has alternative plan design changes that could impact the renewal. The Fund is waiting for disruption reports for the members.

Mr. Lodics reviewed the overall budget changes. He said it is unlikely that there will be a dividend option, which affects some members that use dividends towards rates. IN the past, he said that the Fund use to use Loss Ratio adjustments. Because of the higher increase, the assessments included are not illustrative of any adjustment. This is discretionary to the Committee but may help some individuals. Mr. Lodics said that there are some members who when transitioned to Medicare Advantage, there were some subsidies that may help the increase that is needed. He said he will have a state health benefits comparison to prove that the Fund is likely to still be running much better than the State over 5 years.

As for expenses, Mr. Lodics said the wellness coordinator was removed, although not a big number. Commissioner Hart said he would still like the wellness coordinator earmarked as it might not be dead but can still fit in the wellness budget of \$100,000.

Commissioner Kunze said the Fund is losing money this year. Mr. Lodics said primarily the loss is in this Fund year. There is not a concern for supplemental assessments because there still is 1.5 months of claims but hopefully this budget will correct it in 2025. MR. Kunze said he is concerned about the loss only getting larger and will it be bleeding towards the end of the year. Mr. Lodics said there is not a large surplus regeneration for next year. We hope that this year's claim trend was abnormal.

He said he can do a cash flow projection. Surplus is important and INBR accounts for this, but cash is not concerning.

Mr. Kakoleski asked for a dividend discussion. Mr. Lodics said it would not be the recommendation of our office because we are under the claim's retention best practice level. Mr. Kunze said he would like the Committee to back that discussion because dividends have been usual. Mr. Lodics said we will get this information to the brokers in the next few days.