BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND OPEN MEETING: JUNE 23 2016 FRANKLIN LAKES, NEW JERSEY 12:00 P.M.

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

| KOLL CALL OF 2016 EXECUTIVE COMMUTITEE: | | |
|---|----------------------------|-----------------|
| Chairperson | | |
| Peter Van Winkle | Borough of Rutherford | Present 12:15pm |
| Secretary | | |
| Victor Baginski | Borough of Wallington | Present |
| Executive Committee | Members | |
| Hugo Poli | Village of Ridgefield Park | Present |
| Richard Kunze | Borough of Oakland | Present |
| Gregory Hart | Borough of Franklin Lakes | Present |
| Donna Gambutti | Twp of S. Hackensack | Present |
| Michael Mariniello | Borough of Saddle River | Absent |
| Alternates | | |
| Joseph Catenaro | Township of Fairfield | Absent |
| Gregory Franz | Borough of Edgewater | Present |

ROLL CALL OF 2016 EXECUTIVE COMMITTEE:

APPOINTED OFFICIALS PRESENT:

| Executive Director/ | PERMA Risk Management | Paul Laracy |
|---------------------|--------------------------|------------------|
| Administrator | Services | Emily Koval |
| | | Karen Kamprath |
| Attorney | Huntington Bailey, LLP | William Bailey |
| Treasurer | Joseph Iannaconi | Joseph Iannaconi |
| Third Party | Aetna | Kim Ward |
| Administrator | | |
| Dental Claims | Delta Dental of NJ, Inc. | Kim White |
| Administrator | | |
| Auditor | Lerch, Vinci & Higgins | Elizabeth Shick |
| Actuary | John Vataha | |
| Independent | LaMendola Associates | Clark LaMendola |
| Consultant | | |
| Benefits Consultant | Conner Strong | Jozsef Pfeiffer |
| RX Administrator | Express Scripts | Jeffrey Basile |

OTHERS PRESENT:

Dan Saragnese, Fairfield BOE Matt McArow, RMC Maggie Friel, Conner Strong & Buckelew Max Hollander, Conner Strong & Buckelew

CORRESPONDENCE - None

APPROVAL OF MINUTES: April 28, 2016

MOTION TO APPROVE THE PRESENTED OPEN AND CLOSED MINUTES OF APRIL 28, 2016

| MOTION: | Commissioner Kunze |
|------------------------|-----------------------|
| SECOND: | Commissioner Gambutti |
| ROLL CALL VOTE: | 6 Ayes, 0 Nays |

Fund Attorney swore in Commissioner Franz to the Executive Committee.

EXECUTIVE DIRECTORS REPORT

FINANCES

PRO FORMA REPORTS

- **Fast Track Financial Reports** as of April 30, 2016
 - Historical Income Statement
 - Cash Flow Tracking Reports

Executive Director said the year to date surplus is off to a strong start and the Fund should see a respectable renewal for next year, which will be projected after the June data is received.

ADMINISTRATION

AUDITOR AND ACTUARY YEAR-END REPORTS - A copy of the Annual Financial Audit for the period ending December 31, 2015 was distributed at the meeting. Ms. Shick was present to review the Audit. PERMA will make a filing with the Departments of Insurance and Community Affairs to meet the June 30th deadline.

Ms. Shick said the Fund received an unmodified opinion. She said the Fund is in a good place overall financially. Commissioner Kunze thanked the fund professionals for their work in producing a positive audit.

STATEMENT OF ACTUARIAL OPINION - Included in the agenda is the review of actuarial assumptions and actuarial methods used in determining the reserves, by the Fund Actuary to be filed with the December 31, 2015 year end financial reports to New Jersey Department of Banking and Insurance.

DIVIDEND CONSIDERATION - Due to positive financial results, the BMED can consider a dividend. Last year's dividend was exceptional because of payment to dental only members on reserves developed while they were medical members.

A dividend of \$753,889, or 1/5th of the amount available, after accounting for appropriate reserves, is recommended.

| Item | Status | |
|--|--------|-------------|
| Surplus as of 12/31/2015 | \$ | 13,326,109 |
| Pluss MRHIF Dividend | \$ | 211,579 |
| Surplus Target - 3 Months of Claims | \$ | (5,010,194) |
| Less Surplus of Former Members and Excess Retention on Dental Only Members | \$ | (2,258,047) |
| Less Retention for Rate Stabilization | \$ | (2,500,000) |
| Available | \$ | 3,769,447 |
| Paid in 2011 | \$ | 445,158 |
| Paid in 2012 | \$ | - |
| Paid in 2013 | \$ | - |
| Paid in 2015 | \$ | 2,412,751 |
| Recommended for 2016 | \$ | 753,889 |

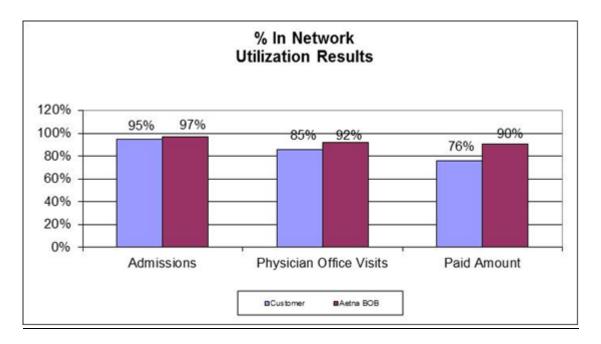
Executive Director said the dividend can be considered today or held off until the August meeting. He said the funds can be used to offset individual rates. He said this also includes the Fund's portion of the MRHIF dividend. The Commissioners agreed to hold a strategic meeting in August to discuss the dividend and draft budget. Executive Director said this would also be a good time to discuss the out of network claims and wellness strategy. The Committee agreed to table the dividend resolution until August.

EXPRESS SCRIPTS AUDIT - The Express Scripts audit of the new contract has been finalized and was included in Appendix II. There appears to be a \$1.2 million difference, which we expect to be resolved. Express Scripts will provide a response to the audit soon.

OUT OF NETWORK CLAIMS - The Fund's surplus over the last 18 months is due to a significant reduction in out of network claims. However, a comparison of BMED claims to those of other HIFs indicates that BMED continues to experience higher than average costs out of network claims. BMED out of network claims are still at 24% of claims despite 95% of hospital admissions and 85% of offices visits being in network. HIFs with better in network utilization pay only 5% for out of network claims, indicating that BMED may have the potential to reduce costs significantly.

We would like to have a committee meeting, including interested risk managers, to discuss the development of a plan to address this cost area. BMED also experiences high emergency room, ambulatory surgery, and radiology utilization; other areas that can be explored by the Committee.

If this is acceptable, the matter can be referred either to the Finance Committee or we can use the approach started last year when we had an open discussion at a strategic planning luncheon.



NJ STATE EXAMINATION - The Department of Banking and Insurance has notified PERMA that they will be auditing FY 2015 in late summer/early fall. The cost of this audit is typically borne by the MRHIF, which may be approved at the end of the year when the exam is complete.

AETNA CONTRACT - Executive Director said the Aetna contract should be finalized for the August meeting.

INDEMNITY AND TRUST AGREEMENTS - A few months ago, PERMA sent Indemnity and Trust Agreements and Resolutions to be adopted by the governing body to renew membership with the Fund for an additional 3 years. Below is a list of members who have renewing agreements due by January 1, 2016 and older. Please reach out to PERMA (karenk@permainc.com) for a blank form to be executed. The list was last updated on June 16, 2016.

| MEMBER | I&T EXPIRED |
|----------------------------|-------------|
| Borough of Moonachie | 12/31/2012 |
| Borough of Lodi | 12/31/2012 |
| Borough of North Arlington | 12/31/2012 |
| Borough of Wood-Ridge | 12/31/2012 |
| Borough of Emerson | 12/31/2014 |
| Township of Rochelle Park | 1/1/2015 |
| | |

BENEFITS CONSULTANT REPORT

ONLINE ENROLLMENT SYSTEM TRAINING - The Executive Committee voted and approved mandatory use of the online enrollment system by each member group. If you need training or would like a refresher course on the online enrollment system, please reach out to Karen Kidd at <u>kkidd@permainc.com</u> of PERMA.

CONTACT INFORMATION - Please direct any eligibility, enrollment, billing or system related questions to our dedicated BMED Team. A new member has been added to the BMED Enrollment team, we ask that during her training, all correspondence be sent to the enrollment box. Please do

not email Austin Flinn directly.

MONTHLY BILLING - As a reminder, please be sure to check your monthly invoice for accuracy. If you find a discrepancy, please report it to the BMED enrollment team. The Fund's policy is to limit retro corrections to 60 days.

BROKER EMAIL BOX – RELAUNCH! - We are excited to announce that we've added a new member to our team! Maggie Friel is an Employee Benefits Specialist with over 15+ years experience in the Employee Benefits Industry.

Her role will include acting as a liaison between insurance carriers and clients to resolve claim issues and billing inquiries and performing benefit provision research, as well as assisting our broker partners when they bring these inquiries into the Broker Email Box. We are certain that our dedicated efforts will continue to streamline broker inquires and provide increased response time and data tracking.

NEW MEMBER UPDATE - BMED would like to welcome the Borough of Edgewater that recently joined for medical and prescription benefits on May 1st with approximately 160 enrolled members. We look forward to working with their Risk Manager, Reliance Insurance Group.

WELLNESS PROGRAM UPDATE - The Board Advisor and Wellness Committee have been working with Hackensack University Medical Center to develop a customized Wellness Program for the Fund. PERMA will be meeting with representatives from HUMC on 6/24 to obtain additional details. Attached is a BMED Vital Statistics report for 2016 claims. Some highlights are:

- Highest net paid claim is an aortic aneurism
- The top provider is Hackensack University Medical Group
- Claims and generic utilization are funning well

ACA UPDATE - PCORI Fee Due to the IRS August 1 - The Patient-Centered Outcomes Research Institute (PCORI) fee for plan years ending on and after January 1, 2015 and on and before December 31, 2015 must be remitted to the IRS by August 1, 2016. Typically, the fee is due by July 31st of the year following the last day of a plan year. However, the fee due in 2016 must be paid by Monday, August 1, 2016 since July 31st falls on a weekend this year.

Background

The ACA created the Patient-Centered Outcomes Research Institute to help patients, clinicians, payers and the public make more informed health decisions by advancing comparative effectiveness research. The Institute's research is funded, in part, through PCORI fees paid by insurers of "specified health insurance policies" and plan sponsors of self-insured health plans. Plan sponsors of self-insured health plans are required to pay the PCORI fee for certain health coverage arrangements. Plan sponsors of fully-insured health plans are not responsible for paying the PCORI fee (the obligation rests with the insurer). For a list of insurance coverage or arrangements subject to the PCORI fee, please see the IRS chart Application of the Patient-Centered Outcomes Research Trust Fund Fee to Common Types of Health Coverage or Arrangements.

The POCRI fee applies to policy or plan years ending on or after October 1, 2012 and before October 1, 2019.

PCORI fees are paid directly by the fund on behalf of all member entities and are included in member rates. In response to Commissioner Kunze, Executive Director said the cost is determined by a per

member fee per year.

APPEALS - There is one appeal that needs to be heard in closed session.

FUND ATTORNEY - None

TREASURER - Fund Treasurer said his report is included in the agenda.

CONFIRMATION OF PAYMENT - MAY 2016

| FUND YEAR | AMOUNT |
|-----------|--------------|
| 2015 | \$6,000 |
| 2016 | \$343,740.63 |
| TOTAL | \$349,740.63 |

RESOLUTION 23-16 JUNE 2016 BILLS LIST

| FUND YEAR | AMOUNT |
|-----------|--------------|
| 2016 | \$339,050.78 |
| TOTAL | \$339,050.78 |

BOARD ADVISOR – Board Advisor thanked the Wellness task force. He said the committee is working to develop a model that each town can individually decide how to implement. He said the work with Hackensack University Medical Center is not meant to be exclusive due to the various geographic locations of the members. He said the first phase of the program would be a health fair to explain to the member how to utilize their benefits, followed by a comprehensive exam and an individual program design. He said preventative measures are paid for through the Fund plans, but additional costs need to be discussed. Board Advisor said the focus on HUMC is for their wellness offerings, but there needs to be more accessible locations for the fitness option in order for members to take advantage. Commissioner Poli said he is a member and the PBA receives a very good discount on the gym membership. Commissioner Hart said the event needs to be most convenient for the local level.

AETNA - THIRD PARTY ADMINISTRATOR – Executive Director said the Aetna report is included in the agenda.

PHARMACY NETWORK (Express Scripts) – Mr. Basile said the Fund is trending well. In response to Commissioner Poli, Mr. Basile said the PCSK9 inhibitors have not been utilized as much as was anticipated. The category of people that should be prescribed this drug is very low. He said the BMED gained a high claimant this year, but had a dropped a few high utilizers. In addition, Crestor is now generic, which will reduce brand usage.

DELTA DENTAL – Ms. White said she agrees with Board Advisor that wellness cannot be a single event and must be continuous to be effective. In response to Commissioner Gambutti, Ms. White said to reach out to the program manager for updated wellness materials for her members.

CONSENT AGENDA -

| Resolutions | Subject Matter |
|-------------|----------------------------|
| 21-16 | Annual Audit Certification |

23-16 Approval of the May and June Bills List

MOTION TO APPROVE THE CONSENT AGENDA EXCLUSIVE OF RESOLTUION 22-16:

| MOTION: | Commissioner Hart |
|-----------------|-----------------------|
| SECOND: | Commissioner Gambutti |
| ROLL CALL VOTE: | 7 Ayes, 0 Nays |

OLD BUSINESS: In response to Commissioner Kunze, Mr. Basile said ESI responded to Adler Associates regarding the pharmacy contract audit.

NEW BUSINESS: Commissioner Hart said his employees are not happy with the timing of open enrollment. Executive Director said draft rates can be provided so they can make an informed decision. Program manager said open enrollment can be moved up a few weeks tentatively to October 15th.

Commissioner Poli said retirees are asking for Medicare Part B contributions refunds for their spouses. In response to Commissioner Poli, Commissioner Hart said that is contractual. Mr. Vozza said it depends on the way the town negotiated Chapter 88. Program Manager said what he has seen in most towns only the retiree is being reimbursed.

MOTION TO GO INTO CLOSED SESSION:

| MOTION: | Commissioner VanWinkle |
|---------|------------------------|
| SECOND: | Commissioner Gambutti |
| VOTE: | Unanimous |

MOTION TO APPROVE THE CLAIM APPEAL#06-16-01 CONTINGENT UPON FULL DISCLOSURE TO THE MEMBER THAT THIS IS A ONE TIME APPROVAL AT AN EXPENSE NOT TO EXCEED \$6,650 AND THE RISK MANAGER WILL EDUCATE THE MEMBER ON OUT OF NETWORK USAGE:

| MOTION: | Commissioner VanWinkle |
|---------|-----------------------------------|
| SECOND: | Commissioner Baginksi |
| VOTE: | 6 Ayes, 1 Nay (Commissioner Hart) |

PUBLIC COMMENT:

MOTION TO ADJOURN:

MOTION: SECOND: VOTE: Commissioner VanWinkle Commissioner Kunze Unanimous

MEETING ADJOURNED: 2:00 pm NEXT MEETING: August 16, 2016 Café Capri, East Rutherford, NJ 12:00 P.M. Emily Koval, Assisting Secretary Date Prepared: August 4, 2016