Gateway
BMED FUND
GATEWAY REGIONAL HEALTH INSURANCE FUND

AGENDA AND REPORTS
NOVEMBER 10, 2026
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. posting the annual meeting notice on the Fund's official website where all legal notices are maintained
II. filing advance written notice of this meeting with the Clerk/Administrator of each member municipality and,
III. publication of notice in the Fund's designated newspaper directing the public to the website where legal notices are available

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
AGENDA MEETING: NOVEMBER 10, 2026
FRANKLIN LAKES BOROUGH HALL
12:00 PM

MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ

PLEDGE OF ALLEGIANCE

ROLL CALL OF 2026 EXECUTIVE COMMITTEE

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

APPROVAL OF MINUTES: *September 29, 2026, Open.....TBD*

CORRESPONDENCE – *Resolution 31-26 & Appendix I*

MONTHLY COMMITTEE REPORTS

STRATEGIC PLANNING COMMITTEE – Rich Kunze, Chair

FINANCE/ADMINISTRATION COMMITTEE – Robert Kakoleski, Chair

WELLNESS COMMITTEE – Joe Voytus, Chair
Minutes – Appendix I

SMALL CLAIMS COMMITTEE – Donna Gambutti, Chair

NOMINATION COMMITTEE – Anthony Ciannamea, Chair

NEW MEMBERS COMMITTEE – Gregory Franz, Chair

EXECUTIVE DIRECTOR – PERMA – James Rhodes and Emily Koval
Executive Director's Report **.....Page 4**

BENEFITS CONSULTANT – CONNER STRONG & BUCKELEW - John Lajewski
Benefits Consultant Report ..... **Page 12**

ATTORNEY – William Bailey, Esq.

TREASURER – Joseph Iannaconi
Voucher List October and November 2026 ..... **Page 18**
Treasurers Report ..... **Page 24**
Confirmation of Claims Paid/Certification of Transfers

BOARD ADVISOR – Clark LaMendola

WELLNESS COORDINATOR – Dina Robinson

THIRD PARTY ADMINISTRATOR – Aetna – Jason Silverstein
Monthly Report ..... **Page 26**

PRESCRIPTION PROVIDER – Express Scripts – Packy Costello
Monthly Report ..... **Page 30**

DENTAL ADMINISTRATOR – Delta Dental – Kim White
Monthly Report ..... **No Report**

CONSENT AGENDA ..... **Page 34**

Resolution 30-26: Resolution of Appreciation – Gregory Hart ..... **Page 35**
Resolution 31-26: Approving a Plan to Reduce Deficit Fund Years ..... **Page 36**
Resolution 32-26: Awarding Board Advisor Contract for 2027 ..... **Page 38**
Resolution 33-26: October and November 2026 Bills List ..... **Page 39**

OLD BUSINESS

NEW BUSINESS

PUBLIC COMMENT – ***Motion to Open***
Motion to Close

CLOSED SESSION – Litigation Matters – Resolution to be distributed

MEETING ADJOURNED

PERMA | Risk Management Services

Bergen Municipal Employee Benefits Fund
Executive Director's Report
NOVEMBER 10, 2026

FINANCE AND OPERATIONS

PRO FORMA REPORTS

- **Fast Track Financial Reports** as of August 31, 2026 (page 6)
  - **Historical Income Statement**
  - **Ratios and Indices Report**

CHAIRMAN'S RETIREMENT

A resolution for Chair Hart is included. Happy Retirement!

WELLNESS COORDINATOR

The Wellness Committee met on November 6th. The Committee will be making a recommendation on the Coordinator's contract for 2027.

BOARD ADVISOR 2027 CONTRACT

The Fund discussed soliciting non-fair-and-open quotes for the Board Advisor contract. A resolution awarding the contract to LaMendola Associates is included on the Consent Agenda as Resolution No. 32-26.

FUND QUALIFIED PURCHASING AGENT (QPA)

The Fund QPA contract expires on December 31, 2026. We recommend continuing the services of a QPA for any possible RFPs to go out next year. Due to the expected cost of the QPA, we are requesting to go out for quotes for Fund year 2027.

MOTION: *Motion to allow PERMA to go out for quotes for QPA services.*

MUNICIPAL REINSURANCE HEALTH INSURANCE FUND UPDATES

1. The MRHIF had a special meeting to approve two new members – the Gloucester County Commission and Ocean County Commission effective in the first quarter of 2027. New membership can be very beneficial to the Fund's overall risk spread and cash flow.

2. Medical TPA RFP - A verbal update will be presented at the meeting.

INDEMNITY AND TRUST (I&T) AGREEMENTS

Indemnity and Trust Agreements and Resolutions for adoption by the governing bodies to renew membership with the fund are required to be executed every three years. Below is a list of members with renewing agreements that have expired or will be expiring at the end of this year. Please reach out to HIFadmin@permainc.com for a blank agreement and resolution to be executed. This list was last updated on September 22, 2026.

Member	I&T End Date
Wallington	12/31/2022
Wood-Ridge	12/31/2025
Fanwood Township	12/31/2026
Woodcliff Lake	12/31/2026
Carlstadt Board of Education	12/31/2026
Carlstadt	12/31/2026
Edgewater	12/31/2026
Emerson	12/31/2026
Franklin Lakes	12/31/2026
Midland Park	12/31/2026
Saddle River	12/31/2026
South Hackensack	12/31/2026

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND

FINANCIAL FAST TRACK REPORT

AS OF August 31, 2026

				THIS MONTH	YTD CHANGE	PRIOR YEAR END	FUND BALANCE
1.	**UNDERWRITING INCOME**			**8,539,196**	**65,898,815**	**877,791,462**	**943,690,277**
2.	**CLAIM EXPENSES**						
	Paid Claims			4,775,510	46,669,873	730,009,036	**776,678,909**
	IBNR			69,284	2,724,784	8,506,095	**11,230,880**
	Less Specific Excess			-	(970,430)	(20,128,622)	**(21,099,052)**
	Less Aggregate Excess			-	-	(602,911)	**(602,911)**
	TOTAL CLAIMS			**4,844,793**	**48,424,227**	**717,783,598**	**766,207,825**
3.	**EXPENSES**						
	MA & HMO Premiums			471,971	3,401,863	34,946,669	**38,348,532**
	Excess Premiums			328,779	2,568,705	38,406,148	**40,974,853**
	Administrative			395,624	2,490,228	64,334,309	**66,824,537**
	TOTAL EXPENSES			**1,196,374**	**8,460,796**	**137,687,126**	**146,147,921**
4.	**UNDERWRITING PROFIT/(LOSS) (1-2-3)**			2,498,028	9,013,792	22,320,739	**31,334,530**
5.	**INVESTMENT INCOME**			46,241	250,744	4,233,316	**4,484,059**
6.	**DIVIDEND INCOME**			-	-	8,186,857	**8,186,857**
7.	**STATUTORY PROFIT/(LOSS) (4+5+6)**			**2,544,269**	**9,264,535**	**34,740,911**	**44,005,447**
8.	**DIVIDEND**			-	-	32,700,408	**32,700,408**
9.	**Transferred Surplus IN**			-	-	-	-
10.	**Transferred Surplus OUT**			-	-	-	-
	STATUTORY SURPLUS (7-8+9)			**2,544,269**	**9,264,535**	**2,040,503**	**11,305,038**
				SURPLUS (DEFICITS) BY FUND YEAR			
	Closed		**Surplus**	13,270	(239,821)	5,523,990	**5,284,169**
			Cash	16,189	(247,221)	5,605,105	**5,357,884**
	2024		**Surplus**	139	(894,348)	(4,110,403)	**(5,004,751)**
			Cash	83,320	187,979	(6,456,215)	**(6,268,236)**
	2025		**Surplus**	27,653	429,893	626,916	**1,056,810**
			Cash	(122,889)	(5,913,676)	5,874,000	**(39,676)**
	2026		**Surplus**	2,503,207	9,968,811		**9,968,811**
			Cash	4,922,113	19,783,499		**19,783,499**
	TOTAL SURPLUS (DEFICITS)			**2,544,269**	**9,264,535**	**2,040,503**	**11,305,038**
	TOTAL CASH			**4,898,733**	**13,810,581**	**5,022,890**	**18,833,471**
				CLAIM ANALYSIS BY FUND YEAR			
	TOTAL CLOSED YEAR CLAIMS			**(3,425)**	**302,791**	**600,326,246**	**600,629,037**
	FUND YEAR 2024						
	Paid Claims			2,402	922,778	61,727,662	**62,650,440**
	IBNR			-	-	-	**-**
	Less Specific Excess			-	(13,166)	(2,080,267)	**(2,093,433)**
	Less Aggregate Excess			-	-	-	**-**
	TOTAL FY 2024 CLAIMS			**2,402**	**909,612**	**59,647,395**	**60,557,007**
	FUND YEAR 2025						
	Paid Claims			77,393	8,760,750	50,967,564	**59,728,314**
	IBNR			(102,073)	(8,102,700)	8,506,095	**403,395**
	Less Specific Excess			-	(957,264)	(1,663,703)	**(2,620,967)**
	Less Aggregate Excess			-	-	-	**-**
	TOTAL FY 2025 CLAIMS			**(24,680)**	**(299,214)**	**57,809,956**	**57,510,742**
	FUND YEAR 2026						
	Paid Claims			4,699,140	36,683,555		**36,683,555**
	IBNR			171,357	10,827,484		**10,827,484**
	Less Specific Excess			-	-		**-**
	Less Aggregate Excess			-	-		**-**
	TOTAL FY 2026 CLAIMS			**4,870,496**	**47,511,039**		**47,511,039**
	COMBINED TOTAL CLAIMS			**4,844,793**	**48,424,227**	**717,783,598**	**766,207,825**

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

		FY2026							
INDICES	**2025**	**JAN**	**FEB**	**MAR**	**APR**	**MAY**	**JUN**	**JUL**	**AUG**
Cash Position	5,022,890	$ 2,057,897	$ 7,262,036	$ 8,982,617	$ 11,977,385	$ 14,676,206	$ 16,221,491	$ 13,934,738	$ 18,833,471
IBNR	8,506,095	$ 9,452,611	$ 10,634,986	$ 10,385,636	$ 9,884,784	$ 10,701,173	$ 11,115,043	$ 11,161,596	$ 11,230,880
Assets	10,806,865	$ 12,046,607	$ 14,083,506	$ 16,139,201	$ 17,707,586	$ 19,799,555	$ 20,190,477	$ 20,300,868	$ 22,925,949
Liabilities	8,766,360	$ 9,790,176	$ 11,054,181	$ 10,779,840	$ 10,291,273	$ 11,120,753	$ 11,512,760	$ 11,540,097	$ 11,620,909
Surplus	2,040,504	$ 2,256,431	$ 3,029,325	$ 5,359,361	$ 7,416,313	$ 8,678,802	$ 8,677,718	$ 8,760,771	$ 11,305,040
Claims Paid -- Month	4,529,217	$ 5,592,007	$ 4,877,517	$ 5,698,543	$ 5,724,755	$ 5,845,766	$ 6,876,901	$ 7,278,874	$ 4,775,510
Claims Budget -- Month	4,887,102	$ 6,571,878	$ 6,551,174	$ 6,749,585	$ 6,714,302	$ 7,227,474	$ 7,211,020	$ 7,205,856	$ 7,207,838
Claims Paid -- YTD	61,100,865	$ 5,592,007	$ 10,469,523	$ 16,168,066	$ 21,892,822	$ 27,738,588	$ 34,615,489	$ 41,894,363	$ 46,669,873
Claims Budget -- YTD	57,681,370	$ 6,571,878	$ 13,123,052	$ 19,872,637	$ 26,586,939	$ 33,814,414	$ 41,025,434	$ 48,231,290	$ 55,440,682
RATIOS									
Cash Position to Claims Paid	1.11	0.37	1.49	1.58	2.09	2.51	2.36	1.91	3.94
Claims Paid to Claims Budget -- Month	0.93	0.85	0.74	0.84	0.85	0.81	0.95	1.01	0.66
Claims Paid to Claims Budget -- YTD	1.06	0.85	0.8	0.8	0.8	0.8	0.8	0.87	0.84
Cash Position to IBNR	0.59	0.22	0.68	0.86	1.21	1.37	1.46	1.25	1.68
Assets to Liabilities	1.23	1.23	1.27	1.5	1.72	1.78	1.75	1.76	1.97
Surplus as Months of Claims	0.42	0.34	0.46	0.79	1.1	1.2	1.2	1.22	1.57
IBNR to Claims Budget -- Month	1.74	1.44	1.62	1.54	1.47	1.48	1.54	1.55	1.56

Bergen Municipal Employee Benefits Fund
CONSOLIDATED BALANCE SHEET
AS OF AUGUST 31, 2026
BY FUND YEAR

	BMED 2026	BMED 2025	BMED 2024	CLOSED YEAR	FUND BALANCE
ASSETS					
Cash & Cash Equivalents	19,783,499	(39,676)	(6,268,236)	5,357,884	18,833,471
Assesstments Receivable (Prepaid)	(601,573)	408,237	1,360,965	70,658	1,238,288
Interest Receivable	142	272	(230)	4,783	4,967
Specific Excess Receivable	-	1,104,337	-	-	1,104,337
Aggregate Excess Receivable	-	-	-	-	-
Dividend Receivable	-	-	-	-	-
Prepaid Admin Fees	-	-	-	-	-
Other Assets	1,671,273	48,469	-	25,145	1,744,887
Total Assets	20,853,341	1,521,638	(4,907,501)	5,458,470	22,925,949
LIABILITIES					
Accounts Payable	-	-	-	-	-
IBNR Reserve	10,827,484	403,395	-	-	11,230,880
A4 Retiree Surcharge	43,726	56,849	-	-	100,575
Dividends Payable	-	-	-	131,984	131,984
Retained Dividends	-	-	97,250	42,316	139,566
Accrued/Other Liabilities	13,320	4,584	-	-	17,904
Total Liabilities	10,884,530	464,828	97,250	174,300	11,620,909
EQUITY					
Surplus / (Deficit)	9,968,811	1,056,810	(5,004,751)	5,284,170	11,305,040
Total Equity	9,968,811	1,056,810	(5,004,751)	5,284,170	11,305,040
Total Liabilities & Equity	20,853,341	1,521,638	(4,907,501)	5,458,470	22,925,949
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
2026 Budget Report
as of August 31, 2026

	Cumulative	Annualized	Latest filed	Cumulative	$ Variance	% Variance
Expected Losses				Expensed		
Medical Claims Aetna	49,011,380	74,555,180	61,701,780	40,536,592	8,474,788	17%
Prescription Claims	6,950,010	10,621,705	8,156,748	5,492,732	(627,727)	-13%
Prescription Formulary Rebates	(2,085,004)	(3,186,512)	(2,447,024)	Included Above in Prescription Claims		
Dental Claims	1,564,296	2,349,574	2,287,214	1,481,715	82,581	5%
Subtotal	55,440,682	84,339,947	69,698,718	47,511,039	7,929,643	14%
DMO Premiums	11,360	16,703	28,816	11,365	(5)	0%
Medicare Advantage / EGWP	3,380,876	5,268,085	3,564,224	3,390,498	(9,622)	0%
Reinsurance						
Specific	2,565,403	3,901,676	3,149,432	2,568,705	(3,301)	0%
Total Loss Fund	61,398,322	93,526,410	76,441,190	53,481,607	7,916,715	13%
Loss Fund Contingency	1,360,247	2,040,370	2,040,370	0	1,360,247	0%
Expenses						
Legal	18,034	27,050	27,050	20,715	(2,681)	-15%
Treasurer	14,904	22,356	22,356	14,904	0	0%
Administrator	375,925	571,681	478,620	376,629	(704)	0%
Risk Management Consultants	1,077,608	1,623,167	1,225,905	1,072,863	4,745	0%
Retiree First	81,588	126,672	90,144	93,108	(11,520)	-100%
QPA	2,000	3,000	3,000	2,000	-	-100%
TPA - Aetna	586,393	891,834	719,888	412,851	173,541	30%
TPA - Dental	66,807	100,461	96,713	66,957	(150)	0%
Actuary	13,109	19,664	19,664	14,730	(1,621)	-12%
Auditor	13,317	19,976	19,976	13,320	(3)	0%
Benefits Consultant	382,850	585,722	456,632	383,474	(625)	0%
Board Advisor	12,989	19,484	19,484	10,500	2,489	19%
Subtotal Expenses	2,645,523	4,011,067	3,179,431	2,482,052	163,471	6%
Miscelleneous and Special Services						
Misc/Cont	23,333	35,000	35,000	14,948	8,386	36%
Wellness, Disease, Case Management	66,667	100,000	100,000	5,383	61,283	92%
Affordable Care Act Taxes	9,193	13,982	11,286	15,756	(6,562)	-71%
A4 Surcharge	75,904	116,123	119,153	57,090	18,814	25%
Plan Documents	4,333	6,500	6,500	4,333	-	0%
Claims Audit	26,667	40,000	40,000	0	26,667	100%
Subtotal Misc/Sp Svcs	206,098	311,605	311,939	97,510	108,588	53%
Total Expenses	2,851,621	4,322,672	3,491,370	2,579,562	272,059	10%
Total Budget	65,610,189	99,889,452	81,972,930	56,061,169	9,549,021	15%

REGULATORY

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
REGULATORY
YEAR: 2026

FILING STATUS UPDATES

Items	Filing Status
Budget	Filed upon adoption
Assessments	Filed upon adoption
Actuarial Certification	Filed
Reinsurance Policies	Filed
Fund Commissioners	Filed
Fund Officers	Filed
Renewal Resolutions	Filed
Indemnity and Trust	Filed
New Members	Filed as New Members are approved
Withdrawals	Filed as Members Withdrawal
Risk Management Plan and By Laws	Filed
Cash Management Plan	Filed
Unaudited Financials	Filed through Q3 2024
Annual Audit	12/31/2025 filed
Budget Changes	N/A
Transfers	N/A
Additional Assessments	N/A
Professional Changes	N/A
Officer Changes	N/A
RMP Changes	N/A
Bylaw Amendments	N/A
Contracts	Filed
Benefit Changes	N/A

Contract	Professional	**Contract**	**Insurance**	**Term**
Board Advisor	Clark LaMendola	Y	Y	1/1/2024-12/31/2026
Wellness Coordinator	Dina Robinson	Y	Y	1/1/2026-12/31/2026
Administration	PERMA	Y	Y	1/1/2025-12/31/2027
Benefits Consultant	Conner Strong & Buckelew	Y	Y	1/1/2025-12/31/2027
QPA	The Canning Group	Y	Y	1/1/2026-12/31/2029
Attorney	Huntington Bailey	Y	Y	1/1/2026-12/31/2029
Treasurer	Joseph Iannaconi	Y	Y	1/1/2026-12/31/2029
Auditor	Lerch Vinci Higgins	Y	Y	1/1/2026-12/31/2029
Actuary	Actuarial Solutions	Y	Y	1/1/2026-12/31/2029

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
CONTACTS
YEAR: 2026

Executive Director Team: This team handles all the administrative and financial aspects of the Fund such as rates, state regulatory compliance, and Executive Committee and subcommittee meetings.

Role	Name	Email	Phone
Executive Director	Jim Rhodes	jrhodes@permainc.com	856-552-4920
Associate Executive Director	Emily Koval	emilyk@permainc.com	201-518-7028
Assistant Account Manager	Jordyn Robinson	jrobinson@permainc.com	856-446-9287

Benefits Consultant Team: This team handles all the benefits aspects of the Fund such as plan design, claim issues, cost containment strategies, and Third-Party communications.

Role	Name	Email	Phone
Public Entity & HIF Business Leader	Tammy Brown	tbrown@connerstrong.com	856-552-4694
HIF Business Leader	John Lajewski	jlajewski@connerstrong.com	856-552-4922
Associate Consultant	Jacque Maddren	jmaddren@connerstrong.com	856-552-4688
Senior Business Development Executive	Sean Critchley, Esq.	Scritchley@connerstrong.com	973-736-6511

Client Services Team: This team handles all the enrollment and billing aspects of the Fund such as sending monthly invoices, open enrollment, and adjustments throughout the year.

Role	Name	Email	Phone
Senior Director, HIF Operations	Lenka Bystrianska	lbystrianska@permainc.com	856-479-2214
Director of Client Services	Crystal Bailey	cbailey@permainc.com	856-552-4914
Director of Benefits Operations	Karen Kidd	kkidd@connerstrong.com	856-552-4644
Client Service Specialist	Zoe Rogers	zrogers@permainc.com	856-479-2238

**Pursuant to N.J.A.C Title 11, Chapter 15, Subchapter 5, PERMA, LLC ("PERMA"), as administrator of the Bergen Municipal Employees Benefit Fund ("the Fund"), and its employees, officers and directors hereby provide notice that they have direct and indirect financial interests in Conner Strong & Buckelew Companies, LLC, which is a servicing organization for the Fund.*

CONNER STRONG & BUCKELEW

INSURANCE | RISK MANAGEMENT | EMPLOYEE BENEFITS

GATEWAY - BMED HEALTH INSURANCE FUND
Benefit Consultant Report – November 10, 2026

Agenda

- Executive Overview
- Industry Information
- Fund Strategic Initiatives
- Fund Performance/Observations
- New Fund Member Activity
- Legislative Updates
- Client Services/Eligibility/Enrollment
- Source Documentation
- Previously Reported Information

Executive Overview

The Gateway - BMED Health Insurance Fund continues to show improvements from a financial perspective through 2026. Nonetheless, areas of increasing utilization for both medical & pharmacy claims have been identified, and strategic recommendations presented for consideration. The Office of the Benefits Consultant looks forward to continuing discussions and implementing those solutions that will yield meaningful savings to ensure the long-term stability of the Fund.

Industry Information

Medical – Aetna Hospital/Provider Contract Negotiations

- Virtua Health 1/1/27
- Virtua Medical Group 1/1/27
- Inspira Health 4/1/27

Pharmacy – Express Scripts (ESI) 2027 National Preferred Formulary (NPF)

All impacted members were sent communications from ESI letting them know about the upcoming change(s) to their medications. The communications also include preferred alternatives medication(s). We recommend impacted members share communication with their provider to discuss next steps. Those that are unable to take the preferred alternative medication(s) will need an approved PA to continue to take their current medication(s). Please see attached NPF for further information.

Pharmacy – Express Scripts (ESI) 2027 SaveOnSP

Copay assistance benefit administrator monitors available specialty manufacturer copay assistance programs to optimize your savings opportunity.

Drug list modifications for January 1, 2027, ensure alignment with research and are based on the inclusion of the copay assistance benefit in pharmacy benefit plan design. These changes have minimal plan participant impact. Please see attached for eligible 2027 drug list:

Additions:

- Highlighted in green on associated drug list
- *Communication plan*: SaveOnSP will send a letter to impacted plan participants and place follow-up outbound calls. (sample letter attached)

Removals:

- Highlighted in red on associated drug list
- *Communication plan*: SaveOnSP will send a letter to impacted plan participants and place a follow-up outbound call. (sample letter attached)

Fund Performance/Observations

- Overall financial performance is favorable: PMPM paid claims decreased 16.22% even while membership increased 27.12%.
- Total spending is essentially flat, suggesting the plan has successfully absorbed substantial membership growth without a comparable increase in aggregate paid claims.
- Network performance is improving: Out-of-network utilization and spending have declined substantially over the three-year period.
- Pharmacy is the principal cost pressure, with rapid growth in high-cost specialty and GLP-1 medications, especially Zepbound.
- Chronic disease prevalence remains elevated, particularly for hyperlipidemia, hypertension, lower back pain, blood disorders, and metabolic conditions.
- Primary management priorities: maintain the shift toward in-network care, strengthen chronic-condition management, and closely manage GLP-1 and specialty pharmacy utilization.

Fund Strategic Initiatives

Through an extensive review of the historical medical & pharmacy utilization of the Funds, opportunities to impact key cost drivers were identified, vetted, and presented to multiple Fund Subcommittees for discussion and consideration.

Key recommendation addresses:

- Utilization of GLP-1 medications for weight loss and includes an option to amend the BMI requirement for the medication from ≥32 to ≥35 – effective 1/1/2027
- Comprehensive cancer testing – effective 1st quarter 2026
- Cutting-edge treatment option for musculoskeletal (MSK) conditions – effective 1/1/2027

New Fund Member Activity

All requests for new Fund member participation are coordinated by Sean Critchley.

Prospect	LOB	Current	Referral	Total Enrollment	Committee Notification	U/W Review
Cliffside Park HA	Medical/Rx	SHBP	Vozza	21	7/24/2026	Not Competitive
Hackensack HA	Medical/Rx	SHBP	Vozza	25	7/24/2026	Alternative Plans Provided
Borough of Old Tappan	Medical/Rx	SHBP	Direct	-	7/24/2026	Incomplete Information
Borough of Haworth	Medical/Rx	SHBP	World Ins.	23	8/21/2026	Not Competitive
Borough of Oradell	Medical/Rx	SHBP	KSSS Advisors	92	9/3/2026	Not Competitive
Borough of Leonia	Medical/Rx	SHBP	Nelson-Patterson	74	9/3/2026	Pending UW Review
Township of Tenafly	Medical/Rx	SHBP	Direct from town	110	11/3/2027	Not Competitive
Borough of Riverdale	Medical/Rx	SHBP	World Ins.	30	11/3/2027	Pending UW Review
Borough of Maywood	Medical/Rx	SHBP	World Ins.	69	11/3/2027	Not Competitive
Borough of Hillsdale	Medical/Rx	SHBP	Acrisure	66	11/3/2027	Pending UW Review

Legislative Updates
There are no new legislative updates to report.

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

2027 Fund Year Open Enrollment

- Open Enrollment for the 2027 Fund year will be held October 26th through November 6th
- All enrollment transactions should be completed by November 20th in WEX to ensure ID cards are delivered prior to the beginning of the new Fund year.
- **Open Enrollment guides & related materials have been updated and circulated on October 6th. Sample materials are included with this report. Please contact the Office of Program Manager with any question regarding open enrollment for the 2027 Fund year.**

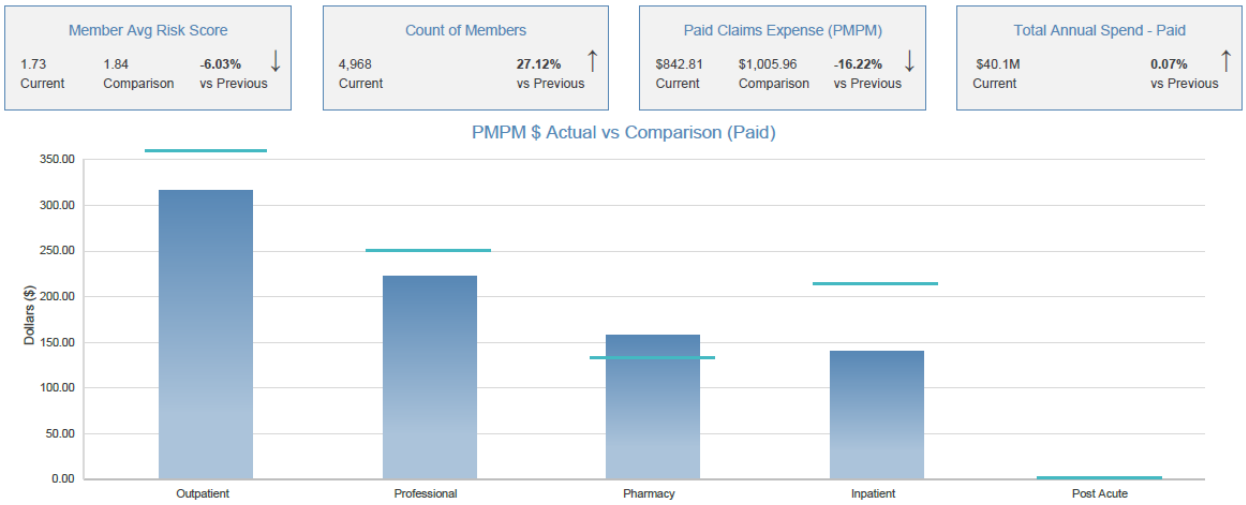
To ensure the appropriate amount of time to implement new Fund members and amendments to existing Fund members plans, notification deadline is October 15th for January 1, 2027, effective date.

Carrier Appeals

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
9/25/2026	Aetna/Medical	BMED 2026 10 01	Anesthesia	Upheld	10/13/2026

IRO Submissions
None to Report

Source Documentation
Cost & Utilization Variance:
A health insurance risk score (often called a Risk Adjustment Factor or RAF score) is a numerical value assigned to a patient, typically between 0.0 and 2.0+, indicating their expected healthcare costs compared to the average patient. Higher scores reflect more chronic conditions or higher risk, leading to higher payments for providers.



Top 20 Drugs – Comparison:

This report presents the top drugs by total amount paid during the reporting and comparison periods. Drugs administered by the pharmacy benefit manager are included and drugs paid through medical claims are excluded. By looking at the total cost for a drug along with the prescription count it can be determined if the cost driver is a few individuals using a high-cost drug or high utilization of the drug. The chart shows the top drugs that had the most growth in terms of amount paid between the comparison period and reporting period.

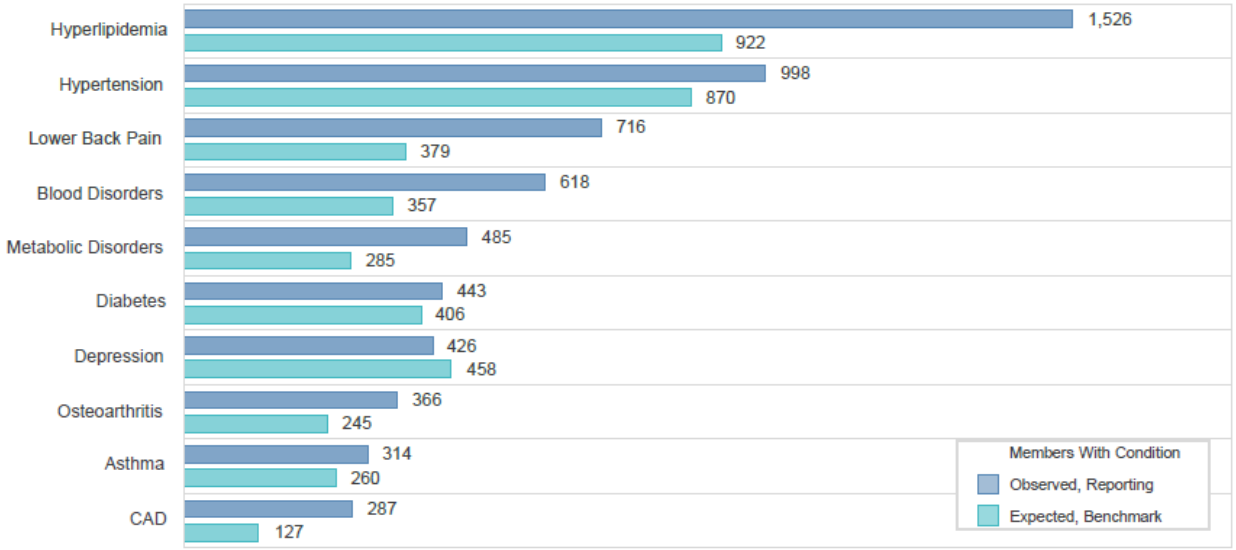
SN	Drug	Generic	Reporting Period Jan 2026 - Aug 2026				Comparison Period Jan 2025 - Aug 2025	%Δ	Prior Period Rank
			Total Paid Amount	Script Count	Member Count*	PMPM	Total Paid Amount		
1	Zepbound	No	$1,504,808	1,209	229	$31.64	$478,849	214%	1
2	Wegovy	No	$526,559	345	76	$11.07	$392,872	34%	2
3	Mounjaro	No	$427,312	253	61	$8.98	$255,068	68%	3
4	Crenessity	No	$356,558	9	1	$7.50	--	--	>5000
5	Xolair	No	$191,122	36	7	$4.02	$25,591	647%	40
6	Dupixent Pen	No	$189,149	26	5	$3.98	$98,833	91%	10
7	Skyrizi Pen	No	$158,857	9	4	$3.34	$206,353	-23%	6
8	Ozempic	No	$157,159	103	29	$3.30	$217,174	-28%	5
9	Bimzelx Autoinjector	No	$145,008	11	2	$3.05	--	--	>5000
10	Enbrel Sureclick	No	$135,716	13	3	$2.85	$127,889	6%	8
11	Kesimpta Pen	No	$124,477	14	2	$2.62	--	--	>5000
12	Ngenla	No	$113,643	4	2	$2.39	$76,033	49%	16
13	Gonal-F Rff Redi-Ject	No	$113,251	11	6	$2.38	$43,770	159%	30
14	Repatha Sureclick	No	$110,803	102	35	$2.33	$56,334	97%	25
15	Stelara	No	$108,934	4	1	$2.29	$241,444	-55%	4
16	Omnitrope	No	$90,772	7	2	$1.91	$91,172	0%	13
17	Tremfya One-Press	No	$82,287	6	2	$1.73	--	--	>5000
18	Vumerity	No	$77,011	3	1	$1.62	$56,964	35%	23
19	Eliquis	No	$73,714	134	48	$1.55	$79,423	-7%	15
20	Calquence	No	$67,697	4	1	$1.42	--	--	>5000
	All Others		$2,784,502	24,318	2,938		$2,933,816	-5%	
	Total		**$7,539,340**	**26,621**	**2,964**		**$5,381,586**		

Chronic Conditions Prevalence:

This report presents the prevalence of specific chronic conditions in the population. According to the Centers for Disease Control (CDC) more than 40% of Americans have one or more chronic conditions and people with chronic diseases in the US account for 75% of healthcare spending. In addition to driving up healthcare costs for employers, chronic conditions also adversely impact employee productivity, attendance, and morale.

- Hyperlipidemia is the most prevalent chronic condition in the reporting period with 1,526 members.
- Hyperlipidemia was also the most prevalent condition in the comparison period with 1,446 members.
- The condition with the greatest % increase in prevalence per 1000 is Alzheimer's with 40%.

Top Conditions by Prevalence



Out of Network Claims Tracking:

Effective January 1, 2026, the Fund Executive Committee passed a resolution to amend the out of network provider reimbursement schedules for all Fund member plans to 150%-professional & 175%-facility of Medicare.

		In Network				OON				OON TOTALS	
DOS	EE Count	Claimant Count	Claim Count	Net Paid	PEPM	Claimant Count	Claim Count	Net Paid	PEPM	% Utilization	% Net Paid
Jan-24	1,418	1632	5644	$2,348,041	$1,656	407	1433	$514,291	$363	20.2%	18.0%
Feb-24	1,413	1605	5414	$2,640,432	$1,869	439	1616	$745,624	$528	23.0%	22.0%
Mar-24	1,738	1940	6578	$2,887,586	$1,661	594	2282	$1,174,508	$676	25.8%	28.9%
Apr-24	1,740	1912	6496	$3,743,860	$2,152	607	2546	$1,575,525	$905	28.2%	29.6%
May-24	1,736	1899	6506	$2,882,148	$1,660	600	2529	$1,315,789	$758	28.0%	31.3%
Jun-24	1,745	1818	5919	$3,458,582	$1,982	585	2288	$1,153,986	$661	27.9%	25.0%
Jul-24	1,743	1882	6558	$3,218,716	$1,847	568	2256	$1,231,386	$706	25.6%	27.7%
Aug-24	1,738	1900	6158	$2,881,515	$1,658	553	1998	$1,102,295	$634	24.5%	27.7%
Sep-24	1,737	1904	6461	$3,248,203	$1,870	535	1994	$1,349,884	$777	23.6%	29.4%
Oct-24	1,751	2083	8030	$5,442,822	$3,108	605	2218	$986,485	$563	21.6%	15.3%
Nov-24	1,752	1934	6609	$3,361,116	$1,918	592	1947	$875,998	$500	22.8%	20.7%
Dec-24	1,745	1970	6505	$2,849,703	$1,633	549	2157	$984,400	$564	24.9%	25.7%
Jan-25	1,747	2029	7281	$4,822,348	$2,760	579	2121	$758,659	$434	22.6%	13.6%
Feb-25	1,749	1917	6430	$3,045,677	$1,741	563	2107	$835,312	$478	24.7%	21.5%
Mar-25	1,749	1958	7045	$3,423,162	$1,957	585	2132	$738,157	$422	23.7%	17.7%
Apr-25	1,757	1935	6766	$3,241,927	$1,845	556	2112	$666,638	$379	23.8%	17.1%
May-25	1,760	1816	6653	$3,177,137	$1,805	535	1813	$662,815	$377	21.4%	17.3%
Jun-25	1,756	1882	6614	$3,337,621	$1,901	551	1817	$786,856	$448	21.6%	19.1%
Jul-25	1,749	1843	6682	$3,602,493	$2,060	550	1839	$426,214	$244	21.6%	10.6%
Aug-25	1,743	1807	5979	$2,800,243	$1,607	524	1803	$367,546	$211	23.2%	11.6%
Sep-25	1,753	1934	6753	$2,892,859	$1,650	552	1895	$469,205	$268	21.9%	14.0%
Oct-25	1,759	2055	7303	$3,362,357	$1,912	562	2051	$443,661	$252	21.9%	11.7%
Nov-25	1,761	1910	6280	$3,945,518	$2,240	544	1812	$449,891	$255	22.4%	10.2%
Dec-25	1,756	2033	6956	$3,699,760	$2,107	522	1971	$468,086	$267	22.1%	11.2%
Jan-26	2,024	2184	7864	$4,086,035	$2,019	561	2064	$357,043	$176	20.8%	8.0%
Feb-26	2,013	2152	7334	$3,502,583	$1,740	576	2109	$485,751	$241	22.3%	12.2%
Mar-26	2,083	2421	8792	$3,958,796	$1,901	619	2368	$480,079	$230	21.2%	10.8%
Apr-26	2,082	2340	8361	$3,586,303	$1,723	582	2217	$463,572	$223	20.9%	11.4%
May-26	2,242	2413	8220	$4,484,692	$2,000	590	2075	$475,944	$212	20.2%	9.6%
Jun-26	2,241	2443	8667	$3,544,545	$1,582	616	2140	$468,786	$209	19.8%	11.7%
Jul-26	2,222	2420	8026	$2,926,272	$1,317	523	1689	$380,471	$171	17.4%	11.5%
Aug-26	2,218	2304	7536	$2,854,715	$1,287	461	1364	$321,266	$145	15.3%	10.1%
Sep-26	2,222	2071	5544	$1,543,186	$695	271	573	$112,989	$51	9.4%	6.8%
Average 2024	**1,688**	**1873**	**76878**	**$38,962,724**	**$1,918**	**553**	**25264**	**$13,010,173**	**$636**	**24.7%**	**25.1%**
Average 2025	**1,753**	**1927**	**80742**	**$41,351,100**	**$1,965**	**552**	**23533**	**$7,073,040**	**$336**	**22.6%**	**14.6%**
Average 2026	**2,150**	**1729**	**70364**	**$30,487,127**	**$1,585**	**400**	**16599**	**$3,545,900**	**$184**	**18.6%**	**10.2%**

Previously Reported Information

Fund Member Billing Process & Training Materials

The office of Program Manger hast developed a comprehensive voiceover training resource for BMED Fund Member entities. The voice-over training covers several key topics, including:

- Billing audits
- Accuracy expectations
- Timelines for the release and processing of billing information
- Methods for improving overall accuracy
- Guidance on Fund Member training requirements

In addition, the material provides practical explanations and examples designed to help staff better understand the billing process and reduce common errors or misunderstandings.

In addition, the monthly WEX training is being updated to include a voiceover component as well. Once completed, it will serve as an additional reference resource that staff can access at their convenience for ongoing training and reinforcement of enrollment procedures.

Annual Notice of Credible Coverage (NOCC)
Express Scripts (ESI) has been provided with all information required for them to send the 2027 NOCC letters.
CMS Annual Enrollment Period is October 15, 2026, through December 7, 2026.
A sample letter is included with this report that ESI will be sending to all members, ages 65 and older who enrolled in BMED pharmacy benefits. The highlighted sections will be completed by ESI and mailed beginning the week of September 21, 2026.

No Surprise Billing and Transparency Act

- Transition to State Arbitration - Effective January 1, 2026:
- As a result of the transition, enrolled members will be receiving new ID cards from Aetna prior to January 1st. subscriber ID numbers and Fund member group numbers will not be changing.

TO ALL FUND COMMISSIONERS:
January 2026
Pursuant to N.J.A.C Title 11, Chapter 15, Subchapter 5, Conner Strong & Buckelew Companies, LLC, as a servicing organization of the **Gateway - BMED HEALTH INSURANCE FUND**
("the Fund"), and its employees, officers and directors hereby provide notice that they have direct and indirect financial interests in PERMA, LLC, which is the Administrator for the Fund.

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
BILLS LIST

OCTOBER 2026

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 2025

VendorName	Comment	InvoiceAmount
LERCH,VINCI & BLISS, LLP	2025 Y/E AUDIT FINAL INV 44256	4,584.00
		4,584.00
	Total Payments FY 2026	**4,584.00**

FUND YEAR 2026

VendorName	Comment	InvoiceAmount
INSPIRA FINANCIAL HEALTH, INC	HSA- WALLINGTON 09/10/26	71.07
INSPIRA FINANCIAL HEALTH, INC	HSA- BOR. WESTWOOD 09/10/26	132.00
INSPIRA FINANCIAL HEALTH, INC	HSA- BORO MONTVALE 09/10/26	114.00
INSPIRA FINANCIAL HEALTH, INC	HSA- BORO MIDLAND PARK 09/10/26	27.00
INSPIRA FINANCIAL HEALTH, INC	HSA- BOROUGH RUTHERFORD 09/10/26	12.00
INSPIRA FINANCIAL HEALTH, INC	HSA- BORO MOONACHIE 09/10/26	9.00
INSPIRA FINANCIAL HEALTH, INC	HSA- WOODCLIFF LAKE 09/10/26	57.00
INSPIRA FINANCIAL HEALTH, INC	HSA- FRANKLIN LIBRARY 09/10/26	6.00
INSPIRA FINANCIAL HEALTH, INC	HSA- S. HACKENSACK 09/10/26	54.00
INSPIRA FINANCIAL HEALTH, INC	HSA- BORO OAKDLAND 09/10/26	63.00
		545.07
PERMA	RETIREE FIRST INV 11012026	11,304.00
PERMA	ADMIN FEES 10/26	48,882.08
PERMA	POSTAGE 09/26	87.43
		60,273.51
THE CANNING GROUP LLC	QPA INV 2026-10 10/26	250.00
		250.00
HUNTINGTON BAILEY, LLP	STATEMENT NO. 45318 OSC REVIEW 10/26	945.00
HUNTINGTON BAILEY, LLP	STMT NO. 45319 BMED ADV. WALLINGTON	665.00
HUNTINGTON BAILEY, LLP	ATTORNEY FEES 10/26	2,254.16
		3,864.16
DORSEY & SEMRAU	WALLINGTON V. S. STOLARZ INV 23717	1,102.50
		1,102.50
SOUTHERN NJ REGL EMPLOYEE BENEFIT	OSC REVIEW REIMBURSEMENT 07/26-09/26	225.87
		225.87
JOSEPH IANNACONI JR.	TREASURER FEE 10/26	1,863.00
		1,863.00
USA TODAY MEDIA CORP.	ORDER# 12023122 A# 1184295 09/2026	49.36
		49.36
LAMENDOLA ASSOCIATES, INC.	FUND ADVISOR FOR 09/26	1,500.00
		1,500.00
NJ ADVANCE MEDIA	AD# 11066673 A# 52759 09/17/2026	200.00
		200.00

ACCESS	INV 12444417 DEPT 418 09/30/26 10/26	290.32
		290.32
CROSS INSURANCE	BROKER FEES 10/26	10,175.36
		10,175.36
ACRISURE EAST INSURANCE SERVICES, LLC	BROKER FEES 09/26	1,328.32
ACRISURE EAST INSURANCE SERVICES, LLC	BROKER FEES 08/26	1,262.98
ACRISURE EAST INSURANCE SERVICES, LLC	BROKER FEES 10/26	1,111.44
		3,702.74
ACRISURE EAST INSURANCE SERVICES, LLC	BROKER FEES 10/26	15,432.20
		15,432.20
ACRISURE EAST INSURANCE SERVICES, LLC	BROKER FEES 10/26	13,846.63
		13,846.63
GJEM INSURANCE AGENCY INC	BROKER FEES 10/26	26,724.95
		26,724.95
COMPETITIVE ADVANTAGE BENEFITS LLC	BROKER FEES 10/26	4,260.28
		4,260.28
WORLD INSURANCE ASSOCIATES, LLC	BROKER FEES 10/26	5,998.59
		5,998.59
MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 10/26	332,229.94
		332,229.94
	TOTAL CHECKS 2026	**482,534.48**
AETNA HEALTH MANAGMENT, LLC	MEDICARE ADVANTAGE 10/26	471,137.41
		471,137.41
DELTA DENTAL INSURANCE CO (DELTACARE USA)	RUTHERFORDS A#F1-7871600000 BE007235982	1,477.76
		1,477.76
AETNA	TPA FEES 10/26	75,940.20
		75,940.20
DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA FEES 10/26	8,440.18
		8,440.18
CONNER STRONG & BUCKELEW	BENEFIT CONSULTANT FEES 10/26	50,501.85
CONNER STRONG & BUCKELEW	PLAN DOCS 10/26	541.67
		51,043.52
ALLEN ASSOCIATES	BROKER FEES 10/26	10,422.00
		10,422.00

FAIRVIEW INSURANCE AGENCY ASSOCIATES	BROKER FEES 10/26	33,367.83
		33,367.83
KAI STRATEGIC INSURANCE PARTNERS LLC	BROKER FEES 10/26	8,068.50
		8,068.50
JOSEPH L VOZZA AGENCY INC	BROKER FEES 10/26	8,253.83
		8,253.83
LUCILLE DINA COLOMBO-ROBINSON	WELLNESS COORDINATOR 10/26	1,000.00
		1,000.00
	TOTAL ACH/WIRES 2026	**669,151.23**
	Total Payments FY 2026	**1,151,685.71**
	TOTAL PAYMENTS ALL FUND YEARS	**1,156,269.71**

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

OCTOBER 2026

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 2025

VendorName	Comment	InvoiceAmount
AETNA HEALTH MANAGMENT, LLC	MEMBER BENEFITS 7/3,8/15/,9/4,9/26,10/31	160.06
		160.06
	Total Payments FY 2025	**160.06**
	TOTAL PAYMENTS ALL FUND YEARS	**160.06**

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
BILLS LIST

NOVEMBER 2026

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 2026

VendorName	Comment	InvoiceAmount
INSPIRA FINANCIAL HEALTH, INC	HSA- WALLINGTON 10/10/26	71.07
INSPIRA FINANCIAL HEALTH, INC	HSA- BOR. WESTWOOD 10/10/26	132.00
INSPIRA FINANCIAL HEALTH, INC	HSA- BORO MONTVALE 10/10/26	114.00
INSPIRA FINANCIAL HEALTH, INC	HSA- BORO MIDLAND PARK 10/10/26	30.00
INSPIRA FINANCIAL HEALTH, INC	HSA- BOROUGH RUTHERFORD 10/10/26	12.00
INSPIRA FINANCIAL HEALTH, INC	HSA- BORO MOONACHIE 10/10/26	9.00
INSPIRA FINANCIAL HEALTH, INC	HSA- WOODCLIFF LAKE 10/10/26	57.00
INSPIRA FINANCIAL HEALTH, INC	HSA- FRANKLIN LIBRARY 10/10/26	6.00
INSPIRA FINANCIAL HEALTH, INC	HSA- S. HACKENSACK 10/10/26	54.00
INSPIRA FINANCIAL HEALTH, INC	HSA- BORO OAKLAND 10/10/26	69.00
		554.07
PERMA	RETIREE FIRST INV 12012026	13,272.00
PERMA	ADMIN FEES 11/26	48,586.72
PERMA	POSTAGE 10/26	709.09
		62,567.81
ACTUARIAL SOLUTIONS, LLC	ACTUARY FEES Q4 2026 11/26	4,920.00
		4,920.00
THE CANNING GROUP LLC	QPA INV 2026-11 11/26	250.00
		250.00
HUNTINGTON BAILEY, LLP	ATTORNEY FEES 11/26	2,254.16
		2,254.16
DORSEY & SEMRAU	WALLINGTON V. S. STOLARZ INV 23748	3,202.50
		3,202.50
JOSEPH IANNACONI JR.	TREASURER FEE 11/26	1,863.00
		1,863.00
USA TODAY MEDIA CORP.	ORDER# 12023131 A# 1184295 10/2026	49.36
		49.36
NJ ADVANCE MEDIA	AD# 11066675 A# 52759 10/15/2026	200.00
		200.00
ACCESS	INV 12470665 DEPT 418 10/31/26 11/26	281.34
		281.34
CROSS INSURANCE	BROKER FEES 11/26	9,432.96
		9,432.96
ACRISURE EAST INSURANCE SERVICES, LLC	BROKER FEES 11/26	1,221.26
		1,221.26
ACRISURE EAST INSURANCE SERVICES, LLC	BROKER FEES 11/26	15,964.84
		15,964.84
ACRISURE EAST INSURANCE SERVICES, LLC	BROKER FEES 11/26	13,763.44
		13,763.44

SADDLE RIVER DELI	LUNCH FOR 09/29/26 MEETING	509.70
		509.70
GJEM INSURANCE AGENCY INC	BROKER FEES 11/26	26,866.32
		26,866.32
COMPETITIVE ADVANTAGE BENEFITS LLC	BROKER FEES 11/26	4,085.20
		4,085.20
WORLD INSURANCE ASSOCIATES, LLC	BROKER FEES 11/26	5,836.75
		5,836.75
MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE 11/26	334,030.64
		334,030.64
	TOTAL CHECKS 2026	**487,853.35**
AETNA HEALTH MANAGMENT, LLC	MEDICARE ADVANTAGE 11/26	470,222.64
		470,222.64
DELTA DENTAL INSURANCE CO (DELTACARE USA)	RUTHERFORDS A#F1-7871600000 BE007274357	1,408.84
		1,408.84
AETNA	TPA FEES 11/26	76,351.80
		76,351.80
DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA FEES 11/26	8,336.64
		8,336.64
CONNER STRONG & BUCKELEW	BENEFIT CONSULTANT FEES 11/26	50,662.07
CONNER STRONG & BUCKELEW	PLAN DOCS 11/26	541.67
		51,203.74
FAIRVIEW INSURANCE AGENCY ASSOCIATES	BROKER FEES 11/26	33,245.37
		33,245.37
JOSEPH L VOZZA AGENCY INC	BROKER FEES 11/26	7,893.61
		7,893.61
LUCILLE DINA COLOMBO-ROBINSON	WELLNESS COORDINATOR 11/26	1,000.00
		1,000.00
ALLEN ASSOCIATES	BROKER FEES 11/26	10,422.00
		10,422.00
	TOTAL ACH/WIRES 2026	**660,084.64**
	Total Payments FY 2026	**1,147,937.99**
	TOTAL PAYMENTS ALL FUND YEARS	**1,147,937.99**

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: 2026 **Month Ending: August**	**Medical**	**Dental**	**Rx**	**Vision**	**Run-In**	**Reinsurance**	**RSR**	**Admin**	**ividend Retaine**	**Metro Interfunc**	**TOTAL**
OPEN BALANCE	15,937,202.09	279,761.52	(5,039,063.02)	0.00	0.00	(153,011.33)	1,537,056.48	1,330,566.71	42,223.91	0.00	13,934,736.36
RECEIPTS											
Assessments	9,050,826.00	243,161.34	852,334.55	0.00	0.00	433,952.15	226,698.57	535,383.45	0.00	0.00	11,342,356.06
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	39,568.39	519.47	0.00	0.00	0.00	6.24	2,854.03	3,284.12	78.40	0.00	46,310.65
Invest Adj	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Subtotal Invest	39,568.39	519.47	0.00	0.00	0.00	6.24	2,854.03	3,284.12	78.40	0.00	46,310.65
Other *	160,486.35	0.00	253,258.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	413,744.49
TOTAL	9,250,880.74	243,680.81	1,105,592.69	0.00	0.00	433,958.39	229,552.60	538,667.57	78.40	0.00	11,802,411.20
EXPENSES											
Claims Transfers	4,347,267.75	198,091.92	1,173,394.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,718,754.22
Expenses	469,015.50	2,955.52	0.00	0.00	0.00	328,778.56	0.00	384,174.47	0.00	0.00	1,184,924.05
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	4,816,283.25	201,047.44	1,173,394.55	0.00	0.00	328,778.56	0.00	384,174.47	0.00	0.00	6,903,678.27
END BALANCE	**20,371,799.58**	**322,394.89**	**(5,106,864.88)**	**0.00**	**0.00**	**(47,831.50)**	**1,766,609.08**	**1,485,059.81**	**42,302.31**	**0.00**	**18,833,469.29**

SUMMARY OF CASH AND INVESTMENT INSTRUMENTS				
Bergen Municipal Employee Benefits Fund				
ALL FUND YEARS COMBINED				
CURRENT MONTH	**August**			
CURRENT FUND YEAR	**2026**			
		Description:	**CHECKING**	**TD Invest**
		ID Number:		
		Maturity (Yrs)		
		Purchase Yield:		
		TOTAL for All Accts & instruments		
Opening Cash & Investment Balance		**$13,934,736.37**	**12168614.96**	**1766121.41**
Opening Interest Accrual Balance		**$4,961.49**	**0**	**4961.49**
1	Interest Accrued and/or Interest Cost	$8.41	$0.00	$8.41
2	Interest Accrued - discounted Instr.s	$0.00	$0.00	$0.00
3	(Amortization and/or Interest Cost)	$0.00	$0.00	$0.00
4	Accretion	$0.00	$0.00	$0.00
5	Interest Paid - Cash Instr.s	$46,310.64	$41,349.15	$4,961.49
6	Interest Paid - Term Instr.s	$0.00	$0.00	$0.00
7	Realized Gain (Loss)	$0.00	$0.00	$0.00
8	Net Investment Income	$46,319.05	$41,349.15	$4,969.90
9	Deposits - Purchases	$11,756,100.55	$11,756,100.55	$0.00
10	(Withdrawals - Sales)	-$6,903,678.27	-$6,903,678.27	$0.00
Ending Cash & Investment Balance		$18,833,469.29	$17,062,386.39	$1,771,082.90
Ending Interest Accrual Balance		$4,969.90	$0.00	$4,969.90
Plus Outstanding Checks		$0.00	$0.00	$0.00
(Less Deposits in Transit)		$0.00	$0.00	$0.00
Balance per Bank		$18,833,469.29	**$17,062,386.39**	$1,771,082.90



BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND

Monthly Claim Activity Report

November 10, 2026



BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND

	MEDICAL CLAIMS PAID 2025	# OF EES	PER EE	MEDICAL CLAIMS PAID 2026	# OF EES	PER EE
JANUARY	$3,860,962	1,750	**$2,206**	$4,442,259	2,024	**$2,195**
FEBRUARY	$4,121,048	1,747	**$2,359**	$4,098,160	2,019	**$2,030**
MARCH	$5,057,377	1,750	**$2,890**	$5,457,201	2,092	**$2,609**
APRIL	$5,001,542	1,748	**$2,861**	$4,293,759	2,093	**$2,051**
MAY	$4,717,063	1,752	**$2,692**	$4,802,147	2,261	**$2,124**
JUNE	$4,492,451	1,754	**$2,561**	$6,348,296	2,260	**$2,809**
JULY	$4,308,401	1,749	**$2,463**	$6,081,454	2,268	**$2,681**
AUGUST	$4,554,758	1,746	**$2,609**	$3,974,450	2,265	**$1,755**
SEPTEMBER	$4,660,057	1,760	**$2,648**			
OCTOBER	$3,994,316	1,759	**$2,271**			
NOVEMBER	$3,870,964	1,758	**$2,202**			
DECEMBER	$4,541,624	1,756	**$2,586**			
TOTALS	**$53,180,562**			**$39,497,726**		
				2026 Average	**2,160**	**$2,282**
				2025 Average	**1,752**	**$2,529**

Large Claimant Report (Drilldown) - Claims Over $100000

Plan Sponsor Unique ID : All
Customer: All
Group / Control: BERGEN MUNICIPAL EMPLOYEE BENEFIT FUND

Paid Dates: 08/01/2026 - 08/31/2026
Service Dates: 01/01/2011 - 08/31/2026
Line of Business: All

	Paid Amt	Diagnosis/Treatment
	$117,433.62	SPONDYLOSIS WITHOUT MYELOPATHY OR
	$105,023.09	RELAPSING-REMITTING MULTIPLE SCLEROSIS
	$101,565.74	SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC
Total:	**$324,022.45**	

aetna™ BMED Health Insurance Fund Dashboard

9/1/25 through 8/31/26 (Unless otherwise noted)

Medical Claims Paid

Average Per Employee Per Month (PEPM)

January 2026 – August 2026

Total Medical Paid per Employee: **$2,282**

Network Discounts

Inpatient:	**61.3%**
Ambulatory:	**66.0%**
Physician/Other:	**67.3%**
TOTAL:	**65.7%**

Provider Network

% Admissions In-Network:	**97.5%**
% Physician Office:	**88.7%**

Aetna Book of Business:

Admissions 97.9%; Physician 91.5%

Top Facilities Utilized

(by total Medical Spend)

- Hackensack University Medical Center
- Valley Hospital
- Memorial Sloan Kettering
- Englewood Hospital
- Morristown Medical Center

Catastrophic Claim Impact

(January 2026 - August 2026)

Number of Claims Over $50,000: **122**

Claimants per 1000 members: **24.3**

Avg. Paid per Claimant: **$132,014**

Percent of Total Paid: **42.7%**

- Aetna BOB- HCC account for an average of 47.9% of total Medical Cost

Aetna One Flex Care Mgmt

Member Outreach:

Total Members Identified: **1,220**

Members Targeted for 1:1 Nurse Support : **293**

Members identified for Digital Activity: **927**

Members receiving Aetna Advice: **2,511**

Average Aetna Advice outreaches per member: **2.2**

CVS Health. CVS Virtual Care

Completed Visits this month : **16**
Unique Patients this month : **13**
Completed Visits in 2026 : **95**
Unique Patients in 2026: **62**

BoB Average First Available 24/7 Care: **32** Minutes
BoB Average First Available MH : **5** Days

Service Center Performance Goal Metrics YTD 2026

Customer Service Performance

1st Call Resolution:	**93.47%**
Abandonment Rate:	**0.19%**
Avg. Speed of Answer:	**4.7 sec**

Claims Performance

Financial Accuracy: **98.67%**

90% processed w/in:	**7.4 days**
95% processed w/in:	**16.3 days**

****

Claims Performance (Monthly)

(August 2026)

90% processed w/in:	**6.0 days**
95% processed w/in:	**12.7 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®

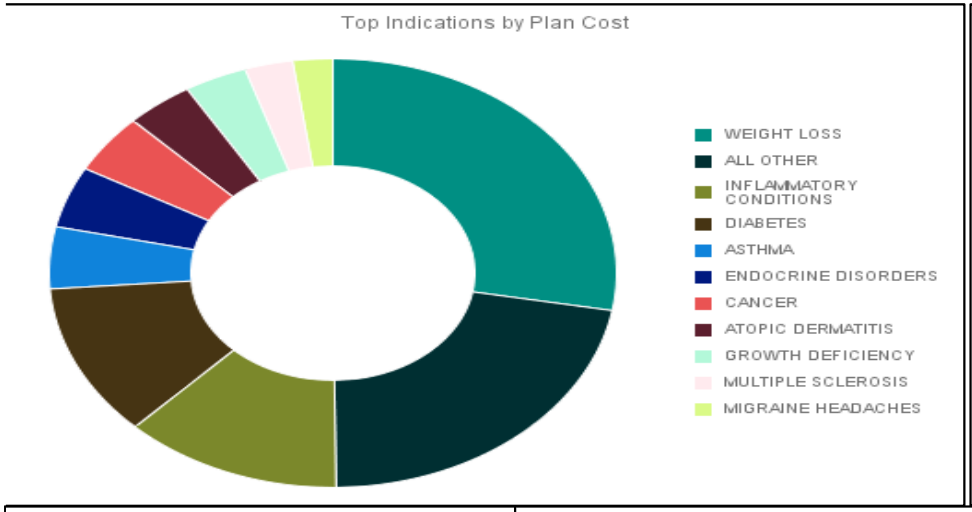
Bergen Municipal Employee Benefits Fund - Monthly Utilization Tracking Report

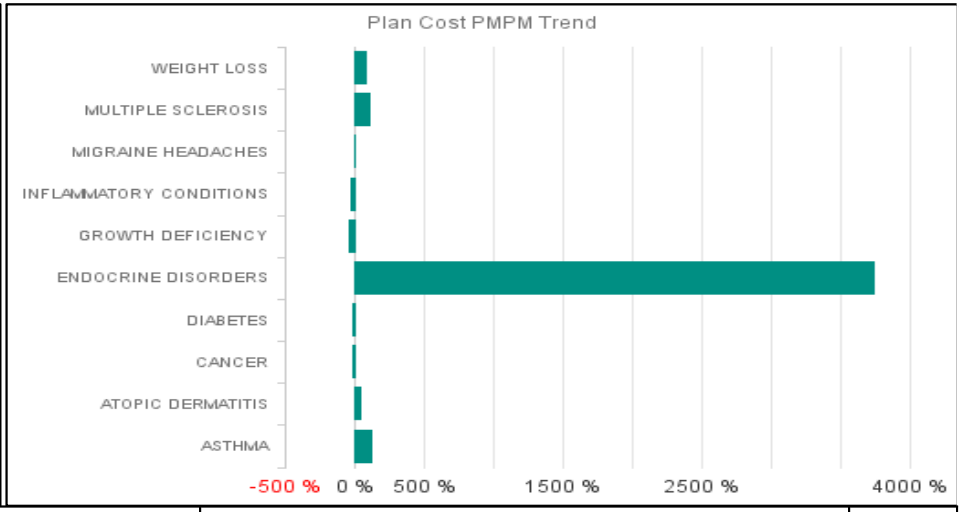
Total Component/Date of Service (Month)	2025 01	2025 02	2025 03	2025 Q1	2025 04	2025 05	2025 06	2025 Q2	2025 07	2025 08	2025 09	2025 Q3	2025 10	2025 11	2025 12	2025 Q4	2025 YTD
Membership	2,772	2,780	2,756	2,769	2,757	2,758	2,755	2,757	2,756	2,738	2,765	2,753	2,773	2,785	2,784	2,781	2,765
Total Days	113,300	101,292	114,769	329,361	110,394	110,779	109,835	331,008	110,642	103,564	110,735	324,941	112,997	103,653	120,474	337,369	1,323,700
Total Patients	1,187	1,089	1,126	1,747	1,097	1,093	1,040	1,631	1,060	1,045	1,075	1,632	1,101	1,087	1,231	1,752	2,370
Total Plan Cost	$728,711	$520,663	$712,375	$1,961,749	$710,966	$723,279	$721,647	$2,155,893	$721,480	$638,075	$756,172	$2,115,726	$725,826	$635,673	$827,326	$2,188,363	$8,422,445
Generic Fill Rate (GFR) - Total	86.7%	85.8%	84.6%	85.7%	85.1%	83.8%	84.5%	84.5%	84.7%	82.6%	81.0%	82.8%	79.1%	82.2%	83.6%	81.7%	83.7%
Plan Cost PMPM	$262.88	$187.29	$258.48	$236.13	$257.88	$262.25	$261.94	$260.69	$261.79	$233.04	$273.48	$256.17	$261.75	$228.25	$297.17	$262.33	$253.85
Total Specialty Plan Cost	$387,411	$179,596	$302,552	$869,558	$337,083	$299,700	$335,841	$972,624	$322,230	$221,699	$315,824	$859,752	$266,314	$215,034	$350,453	$831,802	$3,533,735
Specialty % of Total Specialty Plan Cost	53.2%	34.5%	42.5%	44.3%	47.4%	41.4%	46.5%	45.1%	44.7%	34.7%	41.8%	40.6%	36.7%	33.8%	42.4%	38.0%	42.0%

Total Component/Date of Service (Month)	202601	202602	202603	2026Q1	202604	202605	202606	2026Q2	202607	2026 08	2026 09	2026 Q3	2026 10	2026 11	2026 12	2026 Q4	2026 YTD
Membership	3,360	3,387	3,515	3,421	3,521	3,908	3,886	3,772	3,875	3,875	3,892	3,881					
Total Days	134,347	125,253	149,737	409,337	138,740	160,398	160,292	459,516	159,707	159,022	154,924	470,239					
Total Patients	1,389	1,354	1,504	2,161	1,449	1,565	1,626	2,348	1,594	1,575	1,618	2,387					
Total Plan Cost	$641,639	$732,551	$833,928	$2,208,118	$1,096,432	$1,011,483	$1,106,601	$3,214,324	$1,166,623	$1,043,370	$1,091,631	$3,396,607					
Generic Fill Rate (GFR) - Total	84.6%	84.4%	84.9%	84.6%	82.2%	83.5%	84.1%	83.3%	83.5%	82.7%	80.9%	82.2%					
Plan Cost PMPM	$190.96	$216.28	$237.25	$215.17	$311.40	$258.82	$284.77	$284.08	$301.06	$269.26	$280.48	$291.75					
% Change Plan Cost PMPM	-27.4%	15.5%	-8.2%	-8.9%	20.7%	-1.3%	8.7%	9.0%	15.0%	15.5%	2.5%	13.9%					
Total Specialty Plan Cost	$160,130	$270,645	$274,329	$705,104	$486,571	$373,611	$452,347	$1,312,530	$511,942	$364,130	$345,476	$1,327,901					
Specialty % of Total Specialty Plan Cost	25.0%	36.9%	32.9%	31.9%	44.4%	36.9%	40.9%	40.8%	43.9%	34.9%	31.6%	39.1%					

Top Indications

BERGEN MUNICIPAL EMP BENEFITS (Current Period 01/2026 - 09/2026 vs. Previous Period 01/2025 - 09/2025) Peer = Government - National Preferred Formulary





			Current Period						Previous Period						Trend
Rank	Peer Rank	Indication	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Market Share	Adjusted Rxs	Plan Cost	Plan Cost PMPM	GFR	Peer GFR	Plan Cost PMPM
1	3	WEIGHT LOSS	35.4 %	2,343	$2,469,372	$74.34	2.9 %	3.2 %	23.4 %	992	$1,062,817	$42.79	3.3 %	4.9 %	73.7 %
2	2	INFLAMMATORY CONDITIONS	16.6 %	324	$1,159,188	$34.90	40.7 %	30.1 %	27.8 %	251	$1,264,409	$50.91	28.3 %	32.1 %	-31.5 %
3	1	DIABETES	14.7 %	3,097	$1,026,234	$30.89	34.2 %	27.9 %	20.9 %	2,682	$948,788	$38.20	30.3 %	26.1 %	-19.1 %
4	7	ASTHMA	5.9 %	1,422	$413,846	$12.46	81.6 %	89.7 %	3.0 %	1,060	$138,408	$5.57	82.5 %	89.3 %	123.6 %
5	9	ENDOCRINE DISORDERS	5.9 %	78	$410,494	$12.36	57.7 %	55.7 %	0.2 %	41	$8,011	$0.32	68.3 %	61.9 %	3731.1 %
6	4	CANCER	5.7 %	237	$397,554	$11.97	89.9 %	77.9 %	7.1 %	187	$324,371	$13.06	89.3 %	77.4 %	-8.4 %
7	5	ATOPIC DERMATITIS	4.9 %	567	$340,790	$10.26	84.1 %	79.5 %	4.0 %	441	$183,270	$7.38	85.0 %	83.0 %	39.0 %
8	10	GROWTH DEFICIENCY	4.6 %	41	$318,156	$9.58	0.0 %	0.0 %	8.4 %	51	$382,034	$15.38	0.0 %	0.0 %	-37.7 %
9	8	MULTIPLE SCLEROSIS	3.5 %	28	$243,161	$7.32	0.0 %	40.0 %	1.9 %	24	$87,475	$3.52	50.0 %	44.0 %	107.8 %
10	6	MIGRAINE HEADACHES	2.9 %	348	$202,319	$6.09	46.3 %	51.2 %	3.3 %	239	$149,717	$6.03	34.3 %	54.2 %	1.0 %
		Total Top 10		**8,485**	**$6,981,113**	**$210.15**	**39.1 %**	**43.0 %**		**5,968**	**$4,549,300**	**$183.17**	**41.1 %**	**44.2 %**	**14.7 %**

Top Drugs

BERGEN MUNICIPAL EMP BENEFITS (Current Period 01/2026 - 09/2026 vs. Previous Period 01/2025 - 09/2025) 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	3	ZEPBOUND	WEIGHT LOSS	N	1,752	250	$1,798,636	$54.14	588	105	$599,887	$24.15	124.2 %
2	9	WEGOVY	WEIGHT LOSS	N	487	78	$625,332	$18.82	363	58	$460,395	$18.54	1.6 %
3	1	MOUNJARO	DIABETES	N	467	61	$491,799	$14.80	295	46	$295,185	$11.88	24.6 %
4	186	CRENESSITY	ENDOCRINE DISORDERS	Y	10	1	$397,542	$11.97	NA	NA	NA	NA	NA
5	40	XOLAIR	ASTHMA	Y	44	7	$203,923	$6.14	13	2	$38,033	$1.53	300.9 %
6	32	BIMZELX AUTOINJECTOR	INFLAMMATORY CONDITIONS	Y	18	2	$185,017	$5.57	2	1	$10,948	$0.44	1163.6 %
7	5	OZEMPIC	DIABETES	N	182	29	$176,193	$5.30	266	36	$243,020	$9.78	-45.8 %
8	16	ENBREL SURECLICK	INFLAMMATORY CONDITIONS	Y	23	3	$166,924	$5.02	23	3	$144,879	$5.83	-13.9 %
9	80	NGENLA	GROWTH DEFICIENCY	Y	15	2	$166,322	$5.01	9	1	$76,033	$3.06	63.6 %
10	33	KESIMPTA PEN	MULTIPLE SCLEROSIS	Y	19	2	$166,150	$5.00	NA	NA	NA	NA	NA
11	7	SKYRIZI PEN	INFLAMMATORY CONDITIONS	Y	23	4	$160,274	$4.82	38	5	$272,531	$10.97	-56.0 %
12	8	DUPIXENT PEN	ATOPIC DERMATITIS	Y	30	6	$137,318	$4.13	36	4	$130,440	$5.25	-21.3 %
13	18	TREMFYA ONE-PRESS	INFLAMMATORY CONDITIONS	Y	11	3	$108,688	$3.27	NA	NA	NA	NA	NA
14	8	DUPIXENT PEN	ATOPIC DERMATITIS	N	17	3	$101,584	$3.06	NA	NA	NA	NA	NA
15	59	TREMFYA PEN INDUCTION (2 PEN	INFLAMMATORY CONDITIONS	Y	4	2	$101,342	$3.05	NA	NA	NA	NA	NA
16	102	LYNPARZA	CANCER	Y	5	1	$94,460	$2.84	NA	NA	NA	NA	NA
17	141	OMNITROPE	GROWTH DEFICIENCY	Y	13	2	$90,772	$2.73	17	2	$113,568	$4.57	-40.2 %
18	158	VENCLEXTA	CANCER	Y	6	1	$88,569	$2.67	5	2	$27,479	$1.11	141.0 %
19	73	SKYRIZI	INFLAMMATORY CONDITIONS	Y	12	1	$85,944	$2.59	9	1	$58,888	$2.37	9.1 %
20	51	STELARA	INFLAMMATORY CONDITIONS	Y	3	1	$80,529	$2.42	19	3	$326,660	$13.15	-81.6 %
21	180	CALQUENCE	CANCER	Y	5	1	$79,544	$2.39	NA	NA	NA	NA	NA
22	176	VUMERITY	MULTIPLE SCLEROSIS	Y	9	1	$77,011	$2.32	12	1	$84,089	$3.39	-31.5 %
23	25	JARDIANCE	DIABETES	N	231	34	$73,216	$2.20	176	23	$102,046	$4.11	-46.4 %
24	27	NURTEC ODT	MIGRAINE HEADACHES	N	53	14	$66,777	$2.01	32	10	$36,943	$1.49	35.1 %
25	122	DASATINIB	CANCER	Y	7	1	$60,549	$1.82	10	1	$93,423	$3.76	-51.5 %
			Total Top 25		**3,446**		**$5,784,414**	**$174.13**	**1,913**		**$3,114,446**	**$125.40**	**38.9 %**

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
CONSENT AGENDA
November 10, 2026

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.

Motion_____ **Second**_____

Resolutions	**Subject Matter**

Resolution 30-26: Resolution of Appreciation – Gregory Hart.....**Page 35**
Resolution 31-26: Approving a Plan to Reduce Deficit Fund Years .....**Page 36**
Resolution 32-26: Awarding Board Advisor Contract for 2027.....**Page 38**
Resolution 33-26: October and November 2026 Bills List .....**Page 39**

RESOLUTION NO. 30-26

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
RESOLUTION OF APPRECIATION

GREGORY HART
EXECUTIVE COMMITTEE MEMBER
1988 - 2026

WHEREAS, GREGORY HART (hereafter referred to as "Greg") has served as a Fund Commissioner and Executive Committee member since _____; and

WHEREAS, Greg joined the Bergen Municipal Employee Benefits Fund in January 2013 and served on the Executive Committee through 2026; and

WHEREAS, On January 22, 2019, Greg became the Chairman of the Bergen Municipal Employee Benefits Fund and continuously served at the pleasure of the Fund Commissioners through 2026; and

WHEREAS, Greg was nominated to be the alternate representative to the Municipal Reinsurance Health Insurance Fund (MRHIF) from 2021 to Present; and

WHEREAS, during his time as Fund Commissioner, Greg was instrumental in the FUND's long-term success by being a dependable Chairman and always willing to serve on various committees**;** and

WHEREAS, Greg's leadership, knowledge, dry sense of humor and dedication made a substantial contribution to the FUND's success; and

WHEREAS, the Bergen Municipal Employee Benefit's Executive Committee wishes to express its appreciation on its own behalf and on the behalf of the constituent members of the Fund for the tremendous service Greg provided to the member communities and their taxpayers.

NOW, THEREFORE BE IT RESOLVED, this 10th day of November 2026, the Executive Committee of the Bergen Municipal Employee Benefits Fund does hereby publicly thank and commend **Gregory Hart** for his efforts on behalf of the FUND, which efforts have materially contributed to the success of the FUND and the benefit of the constituent members.

ADOPTED: ***November 10, 2026***

Bergen Municipal Employee Benefits Fund

_____
Chairperson

_____
Secretary

RESOLUTION NO. 31-26

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
RESOLUTION APPROVING A PLAN TO REDUCE DEFICIT FUND YEARS

WHEREAS, since its inception, the Bergen Municipal Employee Benefits Fund (hereinafter, the "Fund") has been a cost-saving option for Bergen County and other surrounding county taxpayers; and

WHEREAS, the New Jersey Department of Banking and Insurance has requested that the Fund establish, by resolution, plans to prevent Fund Year deficits and address any Fund Year deficits that may occur; and

WHEREAS, in accordance with N.J.A.C. 11:15-2.4(f), the Fund budgets for claims at an amount certified by the Fund's actuary as actuarially sound; and

WHEREAS, over the last five years, the Fund has been challenged by rising costs, including prescription and medical inflation, as well as increasingly difficult budget conditions resulting from the following:

Hackensack Meridian Health System Contract - In July 2024, a revised hospital pricing agreement with Aetna resulted in double-digit facility increases.

High-Cost Claimants - The number of high-cost claimants exceeding $100,000, but below the specific retention MRHIF level, was greater than had been realized in prior years.

Out-of-Network Costs - Most notably in Fund Year 2024, out-of-network varicose vein procedures resulted in over $1 million in additional claims compared to Fund Year 2023. The Fund took immediate corrective action, which reduced the cost per claim for these services by almost 90% from Fund Year 2024 to Fund Year 2025. The Fund continues to monitor and manage this utilization closely.

GLP-1 Utilization - GLP-1 utilization amounted to over $800,000 in additional claims compared to Fund Year 2023, most notably following the introduction of Zepbound in November 2023. The Fund continues to monitor and manage this utilization closely.

No Surprises Act Claims - No Surprises Act claims resulted in a backlog of unexpected payments attributable to Fund Years 2021 through 2024, to be paid in 2025; and

WHEREAS, it has also become more difficult to project the ultimate cost of new facility contract negotiations and No Surprises Act claims; and

WHEREAS, Fund Year 2024 ended with a deficit of $4,110,403 as of December 31, 2025; and

WHEREAS, to address this deficit, the Health Insurance Fund Regulations allow a fund to include a trust fund contingency in an amount not to exceed 2.5% of the Fund's budget; and

WHEREAS, the 2027 Bergen Municipal Employee Benefits Fund budget includes a Trust Fund Contingency in the amount of $2,600,000; and

WHEREAS, upon completion of the Fund Year 2027 audit, the Executive Committee may transfer any unused contingency to Fund Year 2024; and

WHEREAS, members of the Fund that contributed to the Trust Fund Contingency but were not members in Fund Year 2024 may receive the reserve as a dividend; and

WHEREAS, the Fund may include additional contingencies in future budgets to further reduce this deficit; and

WHEREAS, as of August 31, 2026, the Fund Year 2026 surplus is over $9.9 million, which exceeds the deficit in Fund Year 2024;

NOW, THEREFORE, BE IT RESOLVED, by the Bergen Municipal Employee Benefits Fund, that at the beginning of each year, upon receipt of the preliminary results of the previous year, the Fund shall, when necessary, implement a plan to address projected deficits and/or levy supplemental assessments pursuant to N.J.A.C. 11:15-2.16, including the use of a Trust Fund Contingency, with any such contingency to be transferred following that Fund Year's internal audit.

ADOPTED: NOVEMBER 10, 2026

BY:_____
CHAIRPERSON

ATTEST:

_____
SECRETARY

RESOLUTION NO. 32-26

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
RESOLUTION AWARDING A CONTRACT FOR INSURANCE CONSULTING SERVICES PURSUANT TO N.J.S.A. 19:44A-20.5

WHEREAS, the Bergen Municipal Employee Benefits Fund (the "Fund") requires insurance consulting services for its operations; and

WHEREAS, LaMendola Associates Inc., 8 Poplar Road, Demarest, New Jersey 07627, submitted a quote to provide such services at a rate of $1,500.00 per month; and

WHEREAS, the Fund sought multiple quotes in accordance with N.J.S.A. 40A:11-6.1; and

WHEREAS, LaMendola Associates Inc. has submitted the required political contribution disclosure pursuant to N.J.S.A. 19:44A-20.5; and

WHEREAS, the Executive Committee recommends that the Fund appoint LaMendola Associates Inc. to provide insurance consulting services for a one-year term at a rate of $1,500.00 per month, for a total contract amount not to exceed $18,000.00;

NOW, THEREFORE, BE IT RESOLVED by the Board of Fund Commissioners of the Bergen Municipal Employee Benefits Fund as follows:

1. **Appointment**. LaMendola Associates Inc., 8 Poplar Road, Demarest, New Jersey 07627, is hereby appointed to provide insurance consulting services to the Fund for a term of one (1) year at a rate of $1,500.00 per month, for a total amount not to exceed $18,000.00.

2. **Effective Date.** This Resolution shall take effect immediately upon its adoption, in accordance with law.

ADOPTED: NOVEMBER 10, 2026

BY:_____
CHAIRPERSON

ATTEST:

_____
SECRETARY

RESOLUTION NO. 33-26

BERGEN MUNICIPAL EMPLOYEE BENEFITS FUND
APPROVAL OF THE OCTOBER AND NOVEMBER 2026 BILLS LISTS

WHEREAS, the **Bergen Municipal Employee Benefits Fund** held a Public Meeting on **November 10, 2026** for the purposes of conducting the official business of the Fund; and

WHEREAS, The Treasurer for the Fund presented bills lists to satisfy outstanding costs incurred for operating the Fund during the month of October and November 2026 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 October and November 2026 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: NOVEMBER 10, 2026

BY:_____
CHAIRPERSON

ATTEST:

_____
SECRETARY

APPENDIX I

BMED Health Insurance Fund: Wellness Committee
Minutes of Meeting, November 5, 2026, 10:00 AM
ZOOM

Dina Robinson, Wellness Coordinator
Joseph Voytus, Wellness Chair
Gregory Hart, Committee Member
Laurie O'Hanlon, Committee Member
Tom Padilla, Committee Member
Jordyn Robinson, Perma

Newsletter Licenses
Dina asked how many licenses should be purchased for this year. Dina noted that 1,500 licenses may not be necessary if the newsletter can be distributed as a PDF instead. Committee agreed that PDF is better to save on licensing fees.

Valley Health Webinars
It was reported that Valley Health is no longer offering webinars. Dina will research alternative options to replace them. It was suggested that a calendar of wellness events be added to the Fund's website. Dina will continue to research vendors or hospitals that offer similar webinars.

Wellness Coordinator Procurement
The wellness coordinator contract is expiring at the end of 2026. The Committee expressed its desire to proceed with a non-fair-and-open process for the wellness coordinator position. No RFP or quotes are planned at this time.

APPENDIX II

From: Strang, Tanner [DOBI]
To: James Rhodes
Cc: Carolina.Chong; william.leach; Emily D Koval
Subject: BERGEN MUNICIPAL EMPLOYEE JOINT INSURANCE FUND - Negative Fund Years
Date: Thursday, September 10, 2026 1:44:56 PM

External Email - This email has come from outside of our company. Think before you click links or open attachments!

Good afternoon,

During a review of your financial statements as of December 31, 2025, we noted that the following fund years carry a negative net position:

Fund Year	Net Position as of 12/31/2025
2024	(4,110,403)

N.J.A.C 11:15-3.16(b) states "The joint insurance fund commissioners shall submit to the Commissioner and the Commissioner of the Department of Community Affairs a report of the causes of the fund's or any account's insufficiency, the assessments necessary to replenish it and the steps taken to prevent a recurrence of such circumstances."

Therefore, the Department is requesting that the Fund develop a formal and detailed plan to rectify the deficiencies in any fund year with a negative net position. The plan may include a planned supplemental assessments and/or transfer of funds per the regulation.

Please provide the plan to the Department by October 8, 2026, which should be approved by the fund commissioners through a formal resolution. Please also provide a copy of the resolution.

Best regards,
Tanner Strang
Insurance Examiner
Office of Solvency Regulation
Department of Banking and Insurance
Tanner.Strang@dobi.nj.gov
+1(609)808-3545