



# METROPOLITAN

## HEALTH INSURANCE FUND

### AGENDA AND REPORTS

NOVEMBER 10, 2025

ZOOM

CONFERENCE CALL

11:00 AM

Zoom Meeting

<https://permainc.zoom.us/j/91409000936>

Meeting ID: 914 0900 0936

One tap mobile

+16469313860,,91409000936# US

+19292056099,,91409000936# US (New York)

**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 school boards,
- III. Posting notice on the Public Bulletin Board of all member municipalities and school boards.
- IV. During the business session portion of this Remote Public Meeting, the audio of all members of the public meeting will be muted. At the end of the business session of the meeting, a time for public comment will be available. Members of the public who desire to provide comment shall raise their virtual hand in the Zoom application and/or submit a written comment via the text message section of the application. The meeting moderator will queue the members of the public that wish to provide comment and the Chairperson will recognize them in order. Public comment shall be concise and to the point, and shall not contain abusive, defamatory, or obscene language.

**METROPOLITAN HEALTH INSURANCE FUND**

**AGENDA MEETING: NOVEMBER 10, 2025**

**CONFERENCE CALL - ZOOM**

**11:00 AM**

**MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ**

**PLEDGE OF ALLEGIANCE**

**ROLL CALL OF 2025 EXECUTIVE COMMITTEE**

<b><u>Fund Commissioner</u></b>	<b><u>Entity</u></b>
Jenny Mundell, Chairwoman	Bloomfield Public Library
Kimberly Duva, Secretary	Bloomfield Township
Cameron Cox, Executive Committee Member	Plainfield Public Schools
Nikole Baltycki, Executive Committee Member	West Caldwell Township
Chris Hartwyk, Executive Committee Member	City of Orange
Margaret Heisey, Executive Committee Member	Scotch Plains Twp
Patrick Wherry, Executive Committee Member	Maplewood Township

**APPROVAL OF MINUTES**, September 18, 2025 ..... Appendix I  
October 3, 2025 ..... Appendix II  
October 29, 2025 ..... Appendix III

**CORRESPONDENCE** - None

**EXECUTIVE DIRECTOR** - PERMA - Brandon Lodics

Executive Director's Report ..... **Page 4**  
Resolution 27-25: 2026 Budget Adoption ..... **Page 12**  
Resolution 28-25: Medical TPA - Contract Award ..... **Page 14**

**PROGRAM MANAGER** - PERMA - John Lajewski

Program Manager's Report ..... **Page 15**

**FUND COORDINATOR** - Eagle Rock Management Group - Joseph DiVincenzo

Fund Coordinator's Report  
Resolution 29-25: New Member Approval ..... **Page 20**

**ATTORNEY** - Ramon Rivera

**TREASURER** - Laracy Associates

Voucher List October and November 2025 ..... **Page 21**  
Resolution 30-25: Approval of the October and November 2025 Bills List **Page 28**

**THIRD PARTY ADMINISTRATOR** - Aetna - Jason Silverstein

Monthly Report .....Page 29

**PRESCRIPTION PROVIDER - Express Scripts - Charles Yuk**

Monthly Report.....Page 34

**DENTAL ADMINISTRATOR - Delta Dental - Crista O'Donnell**

Monthly Report .....N/A

**OLD BUSINESS**

**NEW BUSINESS**

**PUBLIC COMMENT**

*Motion to Open*

*Motion to Close*

**MEETING ADJOURNED**

**Metropolitan Health Insurance Fund  
Executive Director's Report  
October 10, 2025**

**PRO FORMA REPORTS**

- **Fast Track Financial Reports** – As of August 31, 2025 (page 5)
  - **Historical Income Statement**
  - **Consolidated Balance Sheet**
  - **Indices and Ratios Report**

**FINANCE COMMITTEE**

We have reached out to Finance Committee for a meeting as soon as possible to review the options and determine a recommendation regarding the prior-year deficits for Executive Committee action.

At the direction of the Finance Committee, we may need to schedule additional future special meetings of the Executive Committee.

**2026 METRO BUDGET - ADOPTION**

The METRO 2026 budget is included in the agenda as introduced with no material changes from introduction. Assessments were released shortly after the introduction and are included. With adoption today, assessments are considered final.

Pending no objections, the Executive Committee will hold a public hearing to adopt.

Resolution: 27-25 is included on page 12

**Motion:**        *Motion to open the Public Hearing on the 2026 Budget*

**Discussion of Budget and Assessments**

**Motion:**        *Motion to close the Public Hearing*

**Motion:** *Motion to adopt resolution 27-25 approving the 2026 Metropolitan Health Insurance Fund Budget in the amount of \$106,640,018*

**EMERGENCY PROCURMENT RESULTS - TPA**

At the last meeting, the Executive Committee provided the Fund Administrator, Qualified Purchasing Agent and Attorney the authority to obtain fees from Aetna for the 2026 Fund year through the emergency procurement process. Aetna has submitted a proposal, which is included. Resolution 33-25 accepts the proposal and approves the contract. The recommended budget for adoption included for this meeting is adequate and supports the proposed fees.

**2026 MEETING DATES AND EXECUTIVE COMMITTEE**

The 2026 meeting dates, location and Executive Committee should be discussed to prepare for Reorganization in January. A Nominating Committee could be assigned to handle.

**METRO MUNICIPAL EMPLOYEE BENEFITS FUND**

**FINANCIAL FAST TRACK REPORT**

		AS OF	August 31, 2025			
		THIS	YTD	PRIOR		FUND
		MONTH	CHANGE	YEAR END		BALANCE
1.	<b>UNDERWRITING INCOME</b>	<b>7,575,745</b>	<b>58,229,373</b>	<b>207,950,683</b>		<b>266,180,057</b>
2.	<b>CLAIM EXPENSES</b>					
	Paid Claims	7,601,458	54,122,399	180,131,885		234,254,284
	IBNR	39,829	1,033,355	6,202,000		7,235,355
	Less Specific Excess	(187,677)	(2,282,366)	(5,740,079)		(8,022,444)
	Less Aggregate Excess	-	-	-		-
	<b>TOTAL CLAIMS</b>	<b>7,453,610</b>	<b>52,873,388</b>	<b>180,593,806</b>		<b>233,467,194</b>
3.	<b>EXPENSES</b>					
	MA & HMO Premiums	1,018,589	8,065,085	15,510,298		23,575,382
	Excess Premiums	212,655	1,698,435	3,986,606		5,685,040
	Administrative	435,566	3,829,420	11,349,468		15,178,887
	<b>TOTAL EXPENSES</b>	<b>1,666,811</b>	<b>13,592,939</b>	<b>30,846,371</b>		<b>44,439,310</b>
4.	<b>UNDERWRITING PROFIT/(LOSS) (1-2-3)</b>	<b>(1,544,676)</b>	<b>(8,236,954)</b>	<b>(3,489,494)</b>		<b>(11,726,448)</b>
5.	<b>INVESTMENT INCOME</b>	11,779	151,680	603,103		754,782
6.	<b>DIVIDEND INCOME</b>	-	57,191	-		57,191
7.	<b>STATUTORY PROFIT/(LOSS) (4+5+6)</b>	<b>(1,532,898)</b>	<b>(8,028,083)</b>	<b>(2,886,391)</b>		<b>(10,914,474)</b>
8.	<b>DIVIDEND</b>	-	-	-		-
9.	<b>Transferred Surplus IN</b>	-	-	-		-
10.	<b>Transferred Surplus OUT</b>	-	-	-		-
	<b>STATUTORY SURPLUS (7-8+9)</b>	<b>(1,532,898)</b>	<b>(8,028,083)</b>	<b>(2,886,391)</b>		<b>(10,914,474)</b>
<b>SURPLUS (DEFICITS) BY FUND YEAR</b>						
	<b>Closed</b>	<b>Surplus</b>	-	(409,316)	(83,541)	(492,857)
		<b>Cash</b>	-	(571,909)	937,859	365,950
	<b>2024</b>	<b>Surplus</b>	(816,936)	(4,648,384)	(2,802,851)	(7,451,234)
		<b>Cash</b>	(931,145)	(12,399,310)	2,904,238	(9,495,072)
	<b>2025</b>	<b>Surplus</b>	(715,961)	(2,970,383)		(2,970,383)
		<b>Cash</b>	(898,098)	10,916,650		10,916,650
	<b>TOTAL SURPLUS (DEFICITS)</b>		<b>(1,532,898)</b>	<b>(8,028,083)</b>	<b>(2,886,392)</b>	<b>(10,914,474)</b>
	<b>TOTAL CASH</b>		<b>(1,829,243)</b>	<b>(2,054,569)</b>	<b>3,842,097</b>	<b>1,787,528</b>
<b>CLAIM ANALYSIS BY FUND YEAR</b>						
	<b>TOTAL CLOSED YEAR CLAIMS</b>		-	505,126	114,524,196	115,029,322
	<b>FUND YEAR 2024</b>					
	Paid Claims	909,417	12,003,773	60,757,659		72,761,431
	IBNR	(74,424)	(6,006,637)	6,202,000		195,363
	Less Specific Excess	48,812	(1,282,076)	(890,049)		(2,172,124)
	Less Aggregate Excess	-	-	-		-
	<b>TOTAL FY 2024 CLAIMS</b>	<b>883,805</b>	<b>4,715,060</b>	<b>66,069,610</b>		<b>70,784,670</b>
	<b>FUND YEAR 2025</b>					
	Paid Claims	6,692,041	41,355,687			41,355,687
	IBNR	114,253	7,039,992			7,039,992
	Less Specific Excess	(236,489)	(742,477)			(742,477)
	Less Aggregate Excess	-	-			-
	<b>TOTAL FY 2025 CLAIMS</b>	<b>6,569,805</b>	<b>47,653,202</b>			<b>47,653,202</b>
	<b>COMBINED TOTAL CLAIMS</b>	<b>7,453,610</b>	<b>52,873,388</b>	<b>180,593,806</b>		<b>233,467,193</b>

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.

METRO HEALTH INSURANCE FUND										
RATIOS										
INDICES	2024	FY2025								
		JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	
Cash Position	3,842,097	\$ 6,460,472	\$ 7,124,681	\$ 7,213,488	\$ 4,709,181	\$ 3,648,060	\$ 939,137	\$ 3,616,771	\$ 1,787,528	
IBNR	6,202,000	\$ 6,379,664	\$ 6,567,209	\$ 6,793,798	\$ 6,917,052	\$ 6,986,595	\$ 7,037,466	\$ 7,195,526	\$ 7,235,355	
Assets	5,041,139	\$ 4,666,942	\$ 5,010,026	\$ 4,759,502	\$ 1,982,800	\$ (427,505)	\$ 126,652	\$ 61,026	\$ (1,166,235)	
Liabilities	7,927,531	\$ 8,444,978	\$ 8,687,019	\$ 8,983,617	\$ 9,183,079	\$ 9,307,480	\$ 9,401,559	\$ 9,442,603	\$ 9,748,239	
Surplus	(2,886,392)	\$ (3,778,036)	\$ (3,676,994)	\$ (4,224,114)	\$ (7,200,279)	\$ (9,734,985)	\$ (9,274,908)	\$ (9,381,577)	\$ (10,914,474)	
Claims Paid -- Month	6,252,986	\$ 6,353,824	\$ 5,319,100	\$ 5,908,283	\$ 8,209,760	\$ 8,059,501	\$ 6,355,228	\$ 6,315,245	\$ 7,601,458	
Claims Budget -- Month	4,614,842	\$ 5,324,120	\$ 5,465,452	\$ 5,465,942	\$ 5,474,485	\$ 5,479,557	\$ 5,483,301	\$ 5,698,303	\$ 5,690,979	
Claims Paid -- YTD	72,784,814	\$ 6,353,824	\$ 11,672,924	\$ 17,581,207	\$ 25,790,967	\$ 33,850,468	\$ 40,205,696	\$ 46,520,941	\$ 54,122,399	
Claims Budget -- YTD	62,899,992	\$ 5,324,120	\$ 10,789,572	\$ 16,231,412	\$ 21,709,638	\$ 27,183,256	\$ 32,645,163	\$ 38,340,877	\$ 44,031,856	
<b>RATIOS</b>										
Cash Position to Claims Paid	0.61	1.02	1.34	1.22	0.57	0.45	0.15	0.57	0.24	
Claims Paid to Claims Budget -- Month	1.35	1.19	0.97	1.08	1.5	1.47	1.16	1.11	1.34	
Claims Paid to Claims Budget -- YTD	1.16	1.19	1.08	1.1	1.2	1.3	1.2	1.21	1.23	
Cash Position to IBNR	0.62	1.01	1.08	1.06	0.68	0.52	0.13	0.50	0.25	
Assets to Liabilities	0.64	0.55	0.58	0.53	0.22	-0.05	0.01	0.01	-0.12	
Surplus as Months of Claims	(0.63)	(0.71)	(0.67)	-0.77	-1.32	-1.78	-1.69	(1.65)	-1.92	
IBNR to Claims Budget -- Month	1.34	1.20	1.20	1.24	1.26	1.28	1.28	1.26	1.27	

**METRO Fund**  
**2025 Budget Report**  
as of August 31, 2025

	Cumulative	Annualized	Latest filed	Cumulative Expensed	\$ Variance	% Variance
<b>Expected Losses</b>						
<b>Medical Claims Aetna</b>	41,173,817	62,227,971	53,539,937	44,587,136	(3,413,319)	-8%
Prescription Claims - Excl Bloomfield	2,658,847	3,989,719	1,961,095	2,115,409	(248,310)	-13%
<b>Prescription Formulary Rebates</b>	(850,829)	(1,276,708)	(627,550)	Included Above in Prescription Claims		
Prescription Claims - Bloomfield	59,081	89,462	87,552	Included Above in Prescription Claims		
<b>Dental Claims</b>	990,940	1,508,303	1,023,681	950,657	40,283	4%
<b>Subtotal</b>	44,031,856	66,538,747	55,984,715	47,653,202	(3,621,346)	-8%
<b>HMO/DMO Premiums</b>	22,827	33,568	27,646	41,056	(18,229)	-80%
<b>Medicare Advantage / EGWP</b>	8,002,117	12,071,330	9,304,294	8,024,028	(21,912)	0%
<b>Reinsurance</b>						
<b>Specific</b>	1,698,084	2,543,092	2,158,296	1,698,435	(351)	0%
<b>Total Loss Fund</b>	53,754,883	81,186,736	67,474,950	57,416,721	(3,661,838)	-7%
<b>Surplus Retention Regeneration</b>	533,333	800,000	800,000	0	533,333	0%
<b>Expenses</b>						
<b>Legal</b>	20,400	30,600	30,600	48,060	(27,660)	-136%
<b>Treasurer</b>	14,892	22,338	22,338	18,000	(3,108)	-21%
<b>Administrator/Benefits Consultant</b>	623,829	936,374	793,661	624,832	(1,003)	0%
<b>Risk Management Consultants</b>	1,231,661	1,849,148	1,553,293	1,221,661	10,000	1%
<b>Fund Coordinator</b>	622,178	934,836	748,272	622,908	(730)	0%
<b>TPA - Claims Agent Aetna</b>	765,653	1,146,660	1,021,816	765,811	(158)	0%
<b>Dental TPA</b>	51,967	78,964	48,737	52,091	(124)	0%
<b>Actuary</b>	11,900	17,850	17,850	13,380	(1,480)	-12%
<b>Auditor</b>	14,960	22,440	22,440	14,960	-	0%
<b>Benefits Consultant</b>						
<b>Board Advisor</b>						
<b>Claims Audit</b>	26,667	40,000	40,000	23,331	3,336	13%
<b>Medicare Advantage Implementation</b>	0	0	0	0	-	
<b>Subtotal Expenses</b>	3,384,106	5,079,210	4,299,008	3,405,033	(20,927)	-1%
<b>Miscellaneous and Special Services</b>						
<b>Misc/Cont</b>	12,032	18,048	18,048	5,563	6,469	54%
<b>Wellness, Disease, Case Management</b>	66,667	100,000	100,000	50,460	16,207	24%
<b>Affordable Care Act Taxes</b>	10,413	15,595	13,235	24,270	(13,857)	-133%
<b>A4 Surcharge</b>	436,178	664,551	638,598	382,716	53,462	12%
<b>Plan Documents</b>	6,667	10,000	10,000	0	6,667	100%
<b>Subtotal Misc/Sp Svcs</b>	531,956	808,194	779,881	463,009	68,947	13%
<b>Total Expenses</b>	3,916,062	5,887,404	5,078,888	3,868,042	48,020	1%
<b>Total Budget</b>	58,204,279	87,874,140	73,353,839	61,284,763	(3,080,484)	-5%

**Metro Municipal Employee Benefits Fund**  
**CONSOLIDATED BALANCE SHEET**

AS OF AUGUST 31, 2025

BY FUND YEAR

	METRO 2025	METRO 2024	CLOSED YEAR	FUND BALANCE
<b>ASSETS</b>				
Cash & Cash Equivalents	10,916,650	(9,495,072)	365,950	1,787,528
Assesmtments Receivable (Prepaid)	(5,434,685)	(279,096)	171,527	(5,542,255)
Interest Receivable	-	-	2,258	2,258
Specific Excess Receivable	742,477	1,321,480	107,034	2,170,991
Aggregate Excess Receivable	-	-	-	-
Dividend Receivable	-	-	-	-
Prepaid Admin Fees	-	-	57,191	57,191
Other Assets	358,052	1,196,818	(1,196,818)	358,052
<b>Total Assets</b>	<b>6,582,493</b>	<b>(7,255,871)</b>	<b>(492,857)</b>	<b>(1,166,235)</b>
<b>LIABILITIES</b>				
Accounts Payable	2,324,288	-	-	2,324,288
IBNR Reserve	7,039,992	195,363	-	7,235,355
A4 Retiree Surcharge	143,843	-	-	143,843
Dividends Payable	-	-	-	-
Retained Dividends	-	-	-	-
Accrued/Other Liabilities	44,753	-	-	44,753
<b>Total Liabilities</b>	<b>9,552,876</b>	<b>195,363</b>	<b>-</b>	<b>9,748,239</b>
<b>EQUITY</b>				
Surplus / (Deficit)	(2,970,383)	(7,451,234)	(492,857)	(10,914,474)
<b>Total Equity</b>	<b>(2,970,383)</b>	<b>(7,451,234)</b>	<b>(492,857)</b>	<b>(10,914,474)</b>
<b>Total Liabilities &amp; Equity</b>	<b>6,582,493</b>	<b>(7,255,871)</b>	<b>(492,857)</b>	<b>(1,166,235)</b>
<b>BALANCE</b>	<b>-</b>	<b>-</b>	<b>-</b>	

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.

Type	January	February	March	April	May	June	July	August	Total
Med Budget	4,967,902.00	5,094,571.00	5,106,948.00	5,110,984.00	5,118,615.00	5,116,974.00	5,332,075.00	5,325,748.00	41,173,817.00
Med Claims	2,058,323.41	2,883,296.41	4,475,189.88	5,910,823.61	6,191,927.06	5,287,535.33	5,301,415.37	6,390,590.79	38,499,101.86
Med IBNR	3,172,386.10	1,600,723.56	908,663.43	429,379.75	220,032.23	147,289.03	238,955.44	113,080.91	6,830,510.45
Spec Reim						(232,090.31)	(273,897.93)	(236,488.65)	(742,476.89)
	<b>(262,807.51)</b>	<b>610,551.03</b>	<b>(276,905.31)</b>	<b>(1,229,219.36)</b>	<b>(1,293,344.29)</b>	<b>(85,760.05)</b>	<b>65,602.12</b>	<b>(941,435.05)</b>	<b>(3,413,318.42)</b>
% Variance	<b>-5.29%</b>	<b>11.98%</b>	<b>-5.42%</b>	<b>-24.05%</b>	<b>-25.27%</b>	<b>-1.68%</b>	<b>1.23%</b>	<b>-17.68%</b>	<b>-8.29%</b>
Type	January	February	March	April	May	June	July	August	Total
Rx Budget	319,882.51	343,799.03	343,445.99	342,653.92	342,223.44	342,611.00	341,529.19	341,782.46	2,717,927.55
RX Rebates	(100,000.00)	(107,644.00)	(107,541.00)	(107,296.00)	(107,149.00)	(107,273.00)	(106,927.00)	(106,999.00)	(850,829.00)
Rx Claims	189,912.92	360,420.20	332,713.10	403,118.15	394,488.80	368,511.03	396,856.64	267,347.07	2,713,367.91
Rx IBNR	110,765.83	8,704.30	(4,396.63)	(850.50)	(170.50)	3,767.50	(518.50)	90.00	117,391.50
Accrual RX F	(56,973.88)	(108,126.06)	(99,813.93)	(76,811.52)	(90,732.42)	(101,992.11)	(91,277.03)	(89,623.74)	(715,350.69)
	<b>(23,822.36)</b>	<b>(24,843.41)</b>	<b>7,402.45</b>	<b>(90,098.21)</b>	<b>(68,511.44)</b>	<b>(34,948.42)</b>	<b>(70,458.92)</b>	<b>56,970.13</b>	<b>(248,310.17)</b>
% Variance	<b>-10.83%</b>	<b>-10.52%</b>	<b>3.14%</b>	<b>-38.28%</b>	<b>-29.14%</b>	<b>-14.85%</b>	<b>-30.03%</b>	<b>24.26%</b>	<b>-13.30%</b>
Type	January	February	March	April	May	June	July	August	Total
Dental Budget	119,670.78	119,797.02	120,263.42	120,219.89	120,515.46	128,400.11	131,626.21	130,447.30	990,940.20
Dental Claims	48,788.91	107,844.42	134,017.10	98,917.94	114,494.90	115,103.36	115,673.96	123,726.91	858,567.50
Dental IBNR	57,531.60	4,577.49	4,542.47	4,824.32	4,731.45	8,349.61	6,451.03	1,082.00	92,089.97
	<b>13,350.27</b>	<b>7,375.11</b>	<b>(18,296.15)</b>	<b>16,477.63</b>	<b>1,289.11</b>	<b>4,947.14</b>	<b>9,501.22</b>	<b>5,638.39</b>	<b>40,282.73</b>
% Variance	<b>11.16%</b>	<b>6.16%</b>	<b>-15.21%</b>	<b>13.71%</b>	<b>1.07%</b>	<b>3.85%</b>	<b>7.22%</b>	<b>4.32%</b>	<b>4.07%</b>
Type	January	February	March	April	May	June	July	August	Total
Budget	5,307,455.29	5,450,523.06	5,463,116.41	5,466,561.82	5,474,204.90	5,480,712.11	5,698,303.41	5,690,978.75	44,031,855.75
Claims	2,297,025.24	3,351,561.03	4,941,920.08	6,412,859.70	6,700,910.76	5,771,149.72	5,813,945.97	6,781,664.77	42,071,037.27
IBNRs	3,340,683.53	1,614,005.35	908,809.27	433,353.57	224,593.18	159,406.14	244,887.97	114,252.91	7,039,991.92
Spec Reim	-	-	-	-	-	(232,090.31)	(273,897.93)	(236,488.65)	(742,476.89)
RX Rebate	(56,973.88)	(108,126.06)	(99,813.93)	(76,811.52)	(90,732.42)	(101,992.11)	(91,277.03)	(89,623.74)	(715,350.69)
	<b>(273,279.60)</b>	<b>593,082.74</b>	<b>(287,799.01)</b>	<b>(1,302,839.93)</b>	<b>(1,360,566.62)</b>	<b>(115,761.33)</b>	<b>4,644.43</b>	<b>(878,826.54)</b>	<b>(3,621,345.86)</b>

LINE ITEMS	Annualized Budget FY2025	Proposed Budget FY2026	\$ Change	% Change
Medical Claims Aetna	\$ 64,008,271	\$ 76,381,168	\$ 12,372,897	19.33%
Prescription Claims	\$ 4,012,986	\$ 4,628,492	\$ 615,506	15.34%
Prescription Formulary Rebates	\$ (1,284,156)	\$ (1,388,548)	\$ (104,392)	8.13%
Prescription- Vaccinations Only	\$ 88,920	\$ 88,733	\$ (187)	-0.21%
Dental Claims	\$ 1,570,926	\$ 1,644,220	\$ 73,294	4.67%
<b>Subtotal Claims</b>	<b>68,396,947</b>	<b>81,354,065</b>	<b>\$ 12,957,118</b>	<b>18.94%</b>
HMO/DMO Premiums	\$ 31,291	\$ 31,291	\$ -	0.00%
Medicare Advantage / EGWP	\$ 12,143,051	\$ 14,242,869	\$ 2,099,818	17.29%
<b>Reinsurance</b>				
Specific	\$ 2,562,384	\$ 3,335,204	\$ 772,820	30.16%
<b>Total Loss Fund</b>	<b>\$ 83,133,673</b>	<b>\$ 98,963,429</b>	<b>\$ 15,829,756</b>	<b>\$ 0</b>
<b>Surplus Retention Regeneration</b>	<b>\$ 800,000</b>	<b>\$ 1,500,000</b>	<b>\$ 700,000</b>	<b>87.50%</b>
<b>Expenses</b>				
Legal	\$ 30,600	\$ 31,212	\$ 612	2.0%
Treasurer	\$ 27,000	\$ 30,000	\$ 3,000	11.1%
Administrator/Benefits Consultant	\$ 942,312	\$ 942,312	\$ -	0.0%
Risk Management Consultants	\$ 1,869,961	\$ 1,907,361	\$ 37,400	2.0%
Fund Coordinator	\$ 943,668	\$ 943,668	\$ -	0.0%
TPA - Claims Agent Aetna	\$ 1,155,359	\$ 1,002,246	\$ (153,113)	-13.3%
Dental TPA	\$ 81,964	\$ 81,964	\$ -	0.0%
Actuary	\$ 17,850	\$ 18,207	\$ 357	2.0%
Auditor	\$ 22,440	\$ 22,889	\$ 449	2.0%
QPA	\$ 3,000	\$ 3,000	\$ -	0.0%
<b>Subtotal Expenses</b>	<b>\$ 5,094,154</b>	<b>\$ 4,982,859</b>	<b>\$ (111,295)</b>	<b>-2.18%</b>
<b>Miscellaneous and Special Services</b>				
Misc/Cont	\$ 18,048	\$ 18,048	\$ -	0.00%
Wellness, Disease, Case Management	\$ 100,000	\$ 275,000	\$ 175,000	175.00%
Affordable Care Act Taxes	\$ 15,713	\$ 15,713	\$ -	0.00%
A4 Surcharge	\$ 697,033	\$ 834,969	\$ 137,936	19.79%
Plan Documents	\$ 10,000	\$ 10,000	\$ -	0.00%
Claims Audit	\$ 40,000	\$ 40,000	\$ -	0.00%
<b>Subtotal Misc/Sp Svcs</b>	<b>\$ 880,794</b>	<b>\$ 1,193,730</b>	<b>\$ 312,936</b>	<b>35.53%</b>
<b>Total Expenses</b>	<b>\$ 5,974,948</b>	<b>\$ 6,176,589</b>	<b>\$ 201,641</b>	<b>3.37%</b>
<b>Total Budget</b>	<b>\$ 89,908,621</b>	<b>\$ 106,640,018</b>	<b>\$ 16,731,397</b>	<b>18.61%</b>

	<b>Annualized Assessment FY2025</b>	<b>Proposed Assessment FY2026</b>	<b>Difference \$</b>	<b>Difference %</b>
<b>Group Name</b>	<b>Total</b>	<b>Total</b>	<b>Total</b>	<b>Total</b>
Metro HIF				
Bloomfield Township	\$ 15,765,756	\$ 18,848,676	\$ 3,102,012	19.68%
Bloomfield Library	\$ 578,400	\$ 692,976	\$ 114,576	19.81%
Chester Township	\$ 1,853,112	\$ 2,149,536	\$ 363,708	19.63%
East Amwell	\$ 238,752	\$ 286,056	\$ 47,304	19.81%
East Hanover	\$ 493,272	\$ 582,192	\$ 88,920	18.03%
East Orange	\$ 1,093,500	\$ 1,290,600	\$ 197,100	18.02%
Irvington	\$ 2,128,944	\$ 1,892,304	\$ 383,616	18.02%
Maplewood	\$ 4,398,720	\$ 5,250,828	\$ 852,108	19.37%
Millburn	\$ 9,695,052	\$ 11,320,728	\$ 1,879,380	19.38%
Town of Morristown	\$ 662,760	\$ 782,460	\$ 119,700	18.06%
Orange Township	\$ 1,361,784	\$ 1,551,168	\$ 195,396	14.35%
Plainfield BOE	\$ 40,070,040	\$ 47,772,528	\$ 7,702,488	19.22%
Scotch Plains Township	\$ 4,055,400	\$ 4,858,740	\$ 803,340	19.81%
Union Township	\$ 2,915,640	\$ 3,438,960	\$ 523,320	17.95%
West Caldwell	\$ 2,538,288	\$ 3,040,512	\$ 502,224	19.79%
West Orange Township	\$ 2,632,680	\$ 3,107,304	\$ 474,624	18.03%

**RESOLUTION NO. 27-25**

**METROPOLITAN HEALTH INSURANCE FUND  
ADOPTION OF THE 2026 PROPOSED BUDGET**

**WHEREAS**, The Metropolitan Health Insurance Fund is required under State regulation to adopt an annual budget in accordance with the Fiscal Affairs Law; and

**WHEREAS**, a quorum of the Executive Committee met on October 3, 2025 in Public Session to introduce the proposed budget for the 2026 Fund Year; and

**WHEREAS**, the Executive Committee met on November 10, 2025 in Public Session to adopt the proposed budget and for the 2026 Fund Year; and

**WHEREAS**, that a public hearing to adopt the 2026 budget was held on November 10, 2025 at 11:00 am.

**NOW THEREFORE BE IT RESOLVED** that the Executive Committee of Metropolitan Health Insurance Fund hereby adopt the 2026 budget in the amount of ***\$106,640,018***

**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: November 10, 2025**

**BY:** \_\_\_\_\_

**CHAIRPERSON**

**ATTEST:**

\_\_\_\_\_

**SECRETARY**

## Metropolitan Health Insurance Fund

### Contact Information/Assumptions

Account Executive: Jason Silverstein  
 Email: SilversteinJ@aetna.com  
 Telephone: 732-501-1852

SIC Code: 6371  
 Mem/EE Ratio: 2.52

**Administrative Service Fees**      **Effective Date: January 01, 2026**

**End Date: December 31, 2026**

		SOLD	
	Current	Year 1	Year 2
Guarantee Period Effective Date	January 01, 2025	January 01, 2026	January 01, 2027
Fee Basis	Mature	Mature	Mature

Medical Fees as Billed (PEPM)*	Estimated Enrollment	Current	Year 1	Year 2
Metropolitan Health Insurance Fund	2,427	\$39.54	\$34.30	\$34.99
Administrative Service Fees	2,427	\$1,151,563	\$998,953	\$738,065
Service Fee Guarantee % Change*		-	-13.25%	2.00%

	Subscribers	All Funds
	Fee Brackets	15,001 - 20,000 Contracts
20,001 - 25,000 Contracts		\$36.00
25,001 - 30,000 Contracts		\$36.00
30,001 - 35,000 Contracts		\$34.30
35,001 - 40,000 Contracts		\$34.30
40,001 - 45,000 Contracts		\$33.30
45,001 - 50,000 Contracts		\$33.30
50,001 - 60,000 Contracts		\$32.30
60,001 and up.		To be negotiated

**RESOLUTION NO. 28-25**

**METROPOLITAN HEALTH INSURANCE FUND**

**RESOLUTION FOR THE AWARD OF CONTRACT PURSUANT TO N.J.S.A. 40A:11-6**

**WHEREAS**, the Metropolitan Health Insurance Fund (hereinafter the “Fund”), is duly constituted as a joint insurance fund and is subject to certain requirements of the Local Public Contracts Law; and

**WHEREAS**, New Jersey Local Public Contracts Law, N.J.S.A. 40A:11-1 et seq., specifically N.J.S.A. 40A:11-6, and the New Jersey Administrative Code, specifically N.J.A.C 5:34-6.1, allows for emergency procurement for matters affecting the public safety, health, and welfare; and

**WHEREAS**, the Executive Committee of the Fund has deemed it necessary and appropriate to obtain the services for third party administrator services (health benefit plans) through an emergency procurement due to the delay and/or inability to issue new Request for Proposals because of the pre-advertisement review process from the New Jersey Office of the State Comptroller;

**NOW, THEREFORE, BE IT RESOLVED**, by the Executive Committee of the Metropolitan Health Insurance Fund, that the following insurance contract awards be approved for the term of January 1, 2026, through December 31, 2026:

Medical Third-Party Administrator – Aetna - \$34.30 PEPM (estimated annual \$1,002,246)

**BE IT FURTHER RESOLVED** that the contracts providing for the above services will be on file in the Fund’s office located at: 9 Campus Drive, Suite 216, Parsippany, NJ 07054; and

**BE IT FURTHER RESOLVED**, that notice of this action shall be advertised in the Fund’s official newspapers in accordance with the law and notice of this action shall be filed with the appropriate regulatory agencies.

ADOPTED: November 10, 2025

**BY:** \_\_\_\_\_  
CHAIR

ATTEST:

\_\_\_\_\_  
SECRETARY

# Metropolitan Health Insurance Fund Program Manager Report

November 2025  
Program Manager: PERMA

## Operational Updates:

## Eligibility/Enrollment:

Please direct any eligibility, enrollment, or system related questions to our dedicated Client Services Team:

- Alexander Koch, [akoch@permainc.com](mailto:akoch@permainc.com), 856-552-4478
- Victoria Friday: [vfriday@permainc.com](mailto:vfriday@permainc.com), 856-552-4748

System training (new and refresher) is provided to all contacts with WEX access **every 3<sup>rd</sup> Wednesday at 10AM**. Please contact [HIFtraining@permainc.com](mailto: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 invitation can be sent.

## Open Enrollment – 1/1/26 (Passive): (Previously Reported)

- METRO OE will be held October 27<sup>th</sup> through November 7<sup>th</sup>
- All OE updates should be completed in WEX by November 21<sup>st</sup> to allow time for ID cards to be delivered to members by 1/1/26
- OE guides distributed on 10/2/2025

## Coverage Updates:

### Aetna Update:

### Out of Network Fee Schedule:

As a follow up to our previous meeting, we worked with our internal actuary and data manager to create a report to show the impact of the out-of-network fee schedule change. The report will track the month over month out of network claims payments based on the month of the date incurred.

The report is developed and will be auto refreshed monthly, and once the claims incurred after August 1, 2025 materialize the report will become a standard part of our package. The initial results are encouraging but immature at this point.

### Express Scripts Updates:

## 2026 National Preferred Formulary (NPF) – Effective 1/1/2026 (Formulary Attached)

- Brokers will be sent the updated 2026 Formulary and Exclusions lists effective January 1, 2026.
- Preferred to not covered – 10 members impacted
- Non-preferred to not covered – 2 members impacted

## SaveOn List – Effective 1/1/2026 (List Attached)

- Drugs highlighted in green (39) have been added effective 1/1/26
- Drugs highlighted in red (14) will be removed effective 1/1/26

- Impacted members will continue to receive the drugs through Accredo Specialty pharmacy but will be required to pay their applicable copay starting 1/1/26

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 the 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).

**SaveOn Savings (1/1/2025 through 6/22/2025) (Report Attached)**

- In 1<sup>st</sup> & 2<sup>nd</sup> Quarter 2025, the MHIF saved \$69,134 for members enrolled in SaveOn
- There are currently 19 participants in the program
- Top Therapeutic 3 Categories:
  - Inflammatory Conditions 10 members, totaling \$33,179 in savings
  - Asthma & Allergy 2 members, totaling \$8,110 in savings
  - Cancer 1 members, totaling \$11,025 in savings

**Encircle Program (GLP-1 Weight Loss) (Previously Reported)**

**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
- PA renewals will need to include documentation to support the above BMI requirements for all members, regardless of members have been approved in the past.

**Effective January 1, 2025:**

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

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

**2025 LEGISLATIVE REVIEW:**

**Medical and Rx Reporting: None**

**No Surprise Billing and Transparency Act: UPDATE - Transition to State Arbitration (Previously Reported)**

**Effective January 1, 2026:**

As previously reported, the Federal No Surprises Act has resulted in the reprocessing of several Million dollars of claims for the HIFs statewide. While the State program does not remove the exposure to these types of claims

reprocessing, it should allow for more predictability and less backlog and surprise cash exposure going forward. 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.

**Appeals:**

**Carrier Appeals:**

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
09/22/2025	Medical/Aetna	METRO 2025 09 03	Surgery	Upheld	10/07/2025
10/07/2025	Medical/Aetna	METRO 2025 10 01	Skilled Nursing	Upheld	10/15/2025

**IRO Submissions:**

Submission Date	Appeal Type	Appeal Number	Reason	Determination	Determination Date
10/07/2025	Medical/Aetna	METRO 2025 09 03	Surgery	Upheld	10/21/2025
10/15/2025	Medical/Aetna	METRO 2025 10 01	Skilled Nursing	Overtured	10/17/2025

**Metro Small Claims Committee Appeals: None**



Prospective Client	Agency	Funding Type	Network	Effective Date	Note(s)
Maplewood Twp	David Balken	Fully Insured	Delta Dental	6/1/2025	Joined MHIF effective 6/1
Montclair MA	IMAC	SHBP	BCBS	1/1/2026	Kickoff Call held with Karen Kidd. Documents with broker.
Secaucus Township	Fairview Insurance, FRP	SHBP	BCBS	1/1/2026	Kickoff Call held with Karen Kidd. Documents with broker.
Guttenberg Township	Brown & Brown	TBD	TBD	1/1/2026	Kickoff Call held with Karen Kidd. Documents with broker.
Hillsdale BOE	IMAC	SEHBP	BCBS	2/1/2026	Waiting on broker to establish Kickoff Call date.
Paterson City MA	Fairview Insurance, FRP	Fully Insured	BCBS	2/1/2026	Closing documents with broker
Passaic City MA	Fairview Insurance, FRP	SHBP	BCBS	2/1/2026 OR 3/01/2026	Waiting on broker to establish Kickoff Call date.
Old Bridge Twp	Conner Strong	SHBP	BCBS	2/1/2026	Pending Kickoff Call
North Haledon Borough	Advantage HR & Benefits	SHBP	BCBS	6/1/2026	Waiting on claims. Broker requested early October
Jersey City	R.D. Parisi & Associates	Self-Funded	BCBS	6/1/2026	Client deciding between BCBS and MetLife.
Nutley Public Schools	IMAC, Acrisure	Self-Funded	BCBS	7/1/2026	Requesting Claims 3.2026
Cliffside Park	Fairview Insurance, FRP	SHBP	BCBS	1/1/2026	DTQ High Claims and MLR
Glenn Ridge Township	Fairview Insurance, FRP	SHBP	BCBS	7/1/2025	DTQ due to pharmacy
Roseland Public Schools	R.D. Parisi & Associates	Fully Insured	BCBS	7/1/2025	Waiting on Final Proposal from PERMA - 900 subscribers
South Orange Village	Brown & Brown	SHBP	BCBS	9/1/2025	DTQ
South Orange / Maplewood BOE	Brown & Brown	SEHBP	BCBS	10/1/2025	DTQ; early indication ~40%
Lyndhurst BOE	IMAC	SEHBP	BCBS	TBD	DTQ
Northvale Borough	KORE Benefits	SHBP	BCBS	1/1/2026	DTQ
Clark Township	GAM Consulting Group LLC	SHBP	BCBS	1/1/2026	DTQ MLR too high
Rockaway Township	IMAC, Acrisure	Fully Insured	BCBS	1/1/2026	3-5%, needed to be more aggressive.
Mountainside Borough	Centric Benefits Consulting	SHBP	BCBS	1/1/2026	DTQ; over 45% w/o broker comp
East Orange Township	Connor Strong	TBD	TBD	1/1/2026	Data group went cold
Neptune Sewage Authority	R.D. Parisi & Associates	SHBP	BCBS	1/1/2026	Broker recommended another vendor
Essex County Vocational School	IMAC	SEHBP	BCBS	1/1/2026	DTQ, uncompetitive
Trenton City (MA)	Fairview Insurance, FRP	SHBP	BCBS	1/1/2026	DTQ
NJ Fireman's Home	Fairview Insurance, FRP	SHBP	BCBS	1/1/2026	DTQ; Need more data, revisiting spring 26
Essex County VoTech	IMAC	SHBP	BCBS	1/1/2026	DTQ High Claims
Neptune Township	R.D. Parisi & Associates	TBD	TBD	1/1/2026	Broker never gave us information
Harrison Township	Fairview Insurance, FRP	SHBP	BCBS	1/1/2026	DTQ Location
Borough of Freehold	Fairview Insurance, FRP	SHBP	BCBS	1/1/2026	DTQ MLR/Location
Brookdale Community College	R.D. Parisi & Associates	SHBP	BCBS	1/1/2026	DTQ Need more data
Bethelville BOE	N/A	TBD	TBD	1/1/2026	DTQ
Montclair Township	IMAC	SHBP	BCBS	1/1/2026	8/25 information sent to PERMA for MA only quote
Passaic Valley Sewage Commission	IMAC	SHBP	BCBS	1/1/2026	Staying with SHBP
Nutley Township	IMAC	SHBP	BCBS	1/1/2026	Broker asked for DTQ
Englewood BOE	Fairview Insurance, FRP	SHBP	BCBS	1/1/2026	DTQ MLR/Location
Fort Lee BOE	Brown & Brown	SEHBP	BCBS	12/1/2025	Went a different direction
Mahwah BOE	IMAC	SEHBP	BCBS	1/1/2026	DTQ MLR
WDMUA	N/A	Fully Insured	BCBS	1/1/2026	DTQ Size
Township of Maple Shade	Fairview Insurance, FRP	SHBP	BCBS	1/1/2026	DTA as per Tammy
Spotswood Township	Brown & Brown	SHBP	BCBS	1/1/2026	DTQ as per Jason
Essex Union Joint Meeting	Fairview Insurance, FRP	SHBP	BCBS	1/1/2026	Running 142%
North Caldwell Borough	R.D. Parisi & Associates	SHBP	BCBS	TBD	Went elsewhere
Fitzgerald City	TBD	TBD	TBD	1/1/2026	Went Cold
Old Bridge BOE	Brown & Brown	SHBP	BCBS	1/1/2026	DTQ High Claims
Cliffside Park MA	Fairview Insurance, FRP	SHBP	BCBS	1/1/2026	Stop marketing as per broker
Caldwell/West Caldwell BOE	IMAC	SEHBP	BCBS	1/1/2026	Went elsewhere
Mercer County MA	Fairview Insurance, FRP	TBD	TBD	1/1/2026	Data was not received
Livingston Township	Fairview Insurance, FRP	SHBP	BCBS	1/1/2026	Proposal sent to broker 10/1; broker never met with client to review.
Contact Information	Title	Email	Phone		
Joseph DiVincenzo	President	<a href="mailto:jdc@eaglerockmg.com">jdc@eaglerockmg.com</a>	856-420-2989 x4685		
Diane Romano	Senior Account Manager	<a href="mailto:dianer@eaglerockmg.com">dianer@eaglerockmg.com</a>	856-420-2989 x3633		
Thomas Kelly	Account Manager	<a href="mailto:tom@eagle-rockmg.com">tom@eagle-rockmg.com</a>	856-420-2989 x3938		

## FUND COORDINATOR REPORT

### NEW BUSINESS UPDATE - NEW MEMBER APPROVAL

#### New Business for 1/1/2026 - Resolution Included

1. Town of Secaucus - Effective 1/1/2026 - Medical/Rx and Medicare Advantage (364 lives)
2. Guttenberg Township - Effective 1/1/2026 - Medical/Rx and Medicare Advantage (80 lives)
3. North Hudson Regional Fire & Rescue - Effective 1/1/2026 - Medicare Advantage (90 lives)
4. Montclair Township - Effective 1/1/2026 - Medicare Advantage (186 lives)

#### Pending for 2/1/2026

1. Old Bridge Township - Medical/Rx
2. Hillsdale Board of Education - Medical/Rx
3. Passaic City (2/1 or 3/1) - Medicare Advantage
4. Paterson City - Medicare Advantage

### WELLNESS - POPULATION HEALTH RFP UPDATE

There will be an update from the Fund Coordinator and Wellness Committee regarding the population health RFP at the meeting.

**RESOLUTION NO. 29-25**

**METROPOLITAN HEALTH INSURANCE FUND  
RESOLUTION TO OFFER MEMBERSHIP**

**WHEREAS**, the **Metropolitan Health Insurance Fund** held a Public Meeting on **November 10, 2025** for the purposes of conducting the official business of the Fund; and

**WHEREAS**, the Executive Director and Actuary of the Fund has reviewed the risk, underwriting detail, and actuarial projections for the Town of Secaucus, Guttenberg Township, North Hudson Regional Fire & Rescue and Montclair Township and recommend an offer of membership; and

**WHEREAS**, the Executive Committee has reviewed the following new member submissions and has approved membership to the following entities that will submit a fully executed Indemnity and Trust agreement to join the Fund:

5. Town of Secaucus - Effective 1/1/2026 – Medical/Rx and Medicare Advantage
6. Guttenberg Township - Effective 1/1/2026 - Medical/Rx and Medicare Advantage
7. North Hudson Regional Fire & Rescue – Effective 1/1/2026 - Medicare Advantage
8. Montclair Township – Effective 1/1/2026 – Medicare Advantage

**BE IT RESOLVED**, it has been determined that the admission to membership in the Fund of the above mentioned entities would be in the best interests of the Fund and the inclusion of the entity in the Fund is consistent with the Fund’s By-laws;

**BE IT RESOLVED**, that the Metropolitan Health Insurance Fund hereby offers membership to the above mentioned entity for medical and prescription coverage contingent upon receipt of the Fund’s authorizing resolution to join the Fund and its executed Indemnity and Trust agreement.

**ADOPTED: November 10, 2025**

**BY:** \_\_\_\_\_  
**CHAIRPERSON**

**ATTEST:** \_\_\_\_\_  
**SECRETARY**

# METROPOLITAN HEALTH INSURANCE FUND

## BILLS LIST

**OCTOBER 2025**

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

**BE IT RESOLVED** that the Metropolitan Health Insurance 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**

<u>VendorName</u>	<u>Comment</u>	<u>InvoiceAmount</u>
THE CANNING GROUP LLC	QPA METRO 2025-10	250.00 <b>250.00</b>
MEDICAL EVALUATION SPECIALISTS	MES CASE # 3817800 9/25/25	306.25 <b>306.25</b>
NJ ADVANCE MEDIA	A# 208875 INV 0011008591 7/7/25	64.08 <b>64.08</b>
ANTONELLI KANTOR RIVERA	OUT OF NETWORK BENE ISSUE 8/12-8/29/25	3,000.00
ANTONELLI KANTOR RIVERA	ATTORNEY FEES - OSC REPORT 8/25/25	675.00
ANTONELLI KANTOR RIVERA	ATTORNEY FEES 8/4/25-8/29/25	3,270.00 <b>6,945.00</b>
WELLNESS COACHES USA LLC	WELLNESS COACHES INV 39426 9/25	7,714.00 <b>7,714.00</b>
ACRISURE NJ PARTNERS INS. SERVICES, LLC	BROKER FEES 10/25	58,665.40 <b>58,665.40</b>
BROWN & BROWN METRO, LLC	BROKER FEES 10/25	14,534.43 <b>14,534.43</b>
	<b>CHECK TOTALS</b>	<b>88,479.16</b>
AETNA	OCTOBER HOLIDAY CREDIT 10/25	-54,223.00 <b>-54,223.00</b>
AETNA HEALTH MANAGEMENT, LLC	MEDICARE ADVANTAGE 10/25	921,794.04 <b>921,794.04</b>
UNITED HEALTHCARE INS COMPANY	MEDICARE ADVANTAGE 10/25	82,544.80 <b>82,544.80</b>
DELTA DENTAL INSURANCE COMPANY	DENTAL- BE006745573 F1-7871900000 10/25	5,696.32 <b>5,696.32</b>
FAIRVIEW INSURANCE AGENCY ASSOCIATES	BROKER FEES 10/25	33,861.59 <b>33,861.59</b>

ACRISURE NJ PARTNERS INS. SERVICES, LLC	BROKER FEES 10/25	45,259.07 <b>45,259.07</b>
EAGLE ROCK MANAGEMENT GROUP, LLC	FUND COORDINATOR 10/25	77,122.00 <b>77,122.00</b>
DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA FEES 10/25	6,633.24 <b>6,633.24</b>
AETNA	MEDICAL TPA FEES 10/25	94,065.66 <b>94,065.66</b>
INSURANCE SOLUTIONS, INC	BROKER FEES 10/25	732.00 <b>732.00</b>
POINT ACCOUNTING GROUP	TREASURER FEES 10/25	2,250.00 <b>2,250.00</b>
ACTUARIAL SOLUTIONS, LLC	ACTUARY FEES Q4 2025	4,470.00 <b>4,470.00</b>
	<b>ACH/WIRE TOTALS</b>	<b>1,220,205.72</b>
	<b>Total Payments FY 2025</b>	<b>1,308,684.88</b>
	<b>TOTAL PAYMENTS ALL FUND YEAR</b>	<b>1,308,684.88</b>

\_\_\_\_\_  
Chairperson

Attest:

\_\_\_\_\_

Dated: \_\_\_\_\_

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

\_\_\_\_\_  
Treasurer

# METROPOLITAN HEALTH INSURANCE FUND BILLS LIST

**NOVEMBER 2025**

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

**BE IT RESOLVED** that the Metropolitan Health Insurance 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**

<u>VendorName</u>	<u>Comment</u>	<u>InvoiceAmount</u>
THE CANNING GROUP LLC	QPA METRO 2025-11	250.00 <b>250.00</b>
GANNETT NEW YORK NJ LOCALIQ	A#1488194 INV 7380783- 11772985 10/25	37.92 <b>37.92</b>
ANTONELLI KANTOR RIVERA	ATTORNEY FEES 9/8/25-9/30/25	6,480.00
ANTONELLI KANTOR RIVERA	ATTORNEY FEES - OSC REPORT 09/25	27,405.00
ANTONELLI KANTOR RIVERA	OUT OF NETWORK BENE ISSUE 09/25	1,485.00 <b>35,370.00</b>
ACRISURE NJ PARTNERS INS. SERVICES, LLC	BROKER FEES 11/25	58,182.13 <b>58,182.13</b>
BROWN & BROWN METRO, LLC	BROKER FEES 11/25	14,592.75 <b>14,592.75</b>
	<b>CHECK TOTALS</b>	<b>108,432.80</b>
AETNA HEALTH MANAGEMENT, LLC	MEDICARE ADVANTAGE 11/25	928,897.35 <b>928,897.35</b>
UNITED HEALTHCARE INS COMPANY	MEDICARE ADVANTAGE 11/25	86,910.15 <b>86,910.15</b>
DELTA DENTAL INSURANCE COMPANY	DENTAL- BE006780724 F1-7871900000 11/25	5,315.65 <b>5,315.65</b>
FAIRVIEW INSURANCE AGENCY ASSOCIATES	BROKER FEES 11/25	35,178.75 <b>35,178.75</b>
ACRISURE NJ PARTNERS INS. SERVICES, LLC	BROKER FEES 11/25	46,514.30 <b>46,514.30</b>
EAGLE ROCK MANAGEMENT GROUP, LLC	FUND COORDINATOR 11/25	78,138.00 <b>78,138.00</b>

DELTA DENTAL OF NEW JERSEY INC.	DENTAL TPA FEES 11/25	6,753.48 <b>6,753.48</b>
AETNA	MEDICAL TPA FEES 11/25	95,251.86
AETNA	AUGUST 2025 NAP CREDIT 11/25	-69,881.00 <b>25,370.86</b>
POINT ACCOUNTING GROUP	TREASURER FEES 11/25	2,250.00 <b>2,250.00</b>
	<b>ACH/WIRE TOTALS</b>	<b>1,215,328.54</b>
	<b>Total Payments FY 2025</b>	<b>1,323,761.34</b>
	<b>TOTAL PAYMENTS ALL FUND YEAR</b>	<b>1,323,761.34</b>

\_\_\_\_\_  
Chairperson

Attest:

\_\_\_\_\_  
Dated:

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

\_\_\_\_\_  
Treasurer

Metro Employee Benefits Fund												
SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED												
Current Fund Year: 2025 Month Ending: August		Medical	Dental	Rx	Vision	Run-In	Reinsurance	RSR	Admin	Dividend Reserve	BMED Interfund	TOTAL
OPEN BALANCE		268,380.28	184,441.73	(671,774.56)	0.00	0.00	1,657,072.10	741,624.12	1,071,080.23	0.00	0.00	3,250,823.90
RECEIPTS												
Assessments		5,963,031.36	118,354.57	219,979.71	0.00	0.00	199,223.75	62,923.06	473,404.55	0.00	0.00	7,036,917.00
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		8,328.90	174.11	0.00	0.00	0.00	1,564.30	700.10	1,011.11	0.00	0.00	11,778.52
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		8,328.90	174.11	0.00	0.00	0.00	1,564.30	700.10	1,011.11	0.00	0.00	11,778.52
Other *		486,281.25	0.00	93,815.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	580,096.31
TOTAL		6,457,641.51	118,528.68	313,794.77	0.00	0.00	200,788.05	63,623.16	474,415.66	0.00	0.00	7,628,791.83
EXPENSES												
Claims Transfers		7,300,007.68	123,726.91	267,347.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,691,081.66
Expenses		1,013,383.32	5,205.99	0.00	0.00	0.00	0.00	0.00	382,413.62	0.00	0.00	1,401,002.93
Other *		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL		8,313,391.00	128,932.90	267,347.07	0.00	0.00	0.00	0.00	382,413.62	0.00	0.00	9,092,084.59
END BALANCE		(1,587,369.21)	174,037.51	(625,326.86)	0.00	0.00	1,857,860.15	805,247.28	1,163,082.27	0.00	0.00	1,787,531.14

<b>SUMMARY OF CASH AND INVESTMENT INSTRUMENTS</b>			
<b>Metro Employee Benefits Fund</b>			
<b>ALL FUND YEARS COMBINED</b>			
<b>CURRENT MONTH</b>	<b>August</b>		
<b>CURRENT FUND YEAR</b>	<b>2025</b>		
	<b>Description:</b>	<b>CHECKING</b>	
	<b>ID Number:</b>		
	<b>Maturity (Yrs)</b>		
	<b>Purchase Yield:</b>		
	<b>TOTAL for All</b>		
	<b>Accts &amp; instruments</b>		
<b>Opening Cash &amp; Investment Balance</b>	<b>\$3,250,823.91</b>	<b>3250823.91</b>	
<b>Opening Interest Accrual Balance</b>	<b>\$0.00</b>	<b>0</b>	
1	Interest Accrued and/or Interest Cost	\$0.00	\$0.00
2	Interest Accrued - discounted Instr.s	\$0.00	\$0.00
3	(Amortization and/or Interest Cost)	\$0.00	\$0.00
4	Accretion	\$0.00	\$0.00
5	Interest Paid - Cash Instr.s	\$11,778.52	\$11,778.52
6	Interest Paid - Term Instr.s	\$0.00	\$0.00
7	Realized Gain (Loss)	\$0.00	\$0.00
8	Net Investment Income	\$11,778.52	\$11,778.52
9	Deposits - Purchases	\$7,617,013.31	\$7,617,013.31
10	(Withdrawals - Sales)	-\$9,092,084.59	-\$9,092,084.59
	Ending Cash & Investment Balance	\$1,787,531.15	\$1,787,531.15
	Ending Interest Accrual Balance	\$0.00	\$0.00
	Plus Outstanding Checks	\$0.00	\$0.00
	(Less Deposits in Transit)	\$0.00	\$0.00
	Balance per Bank	\$1,787,531.15	<b>\$1,787,531.15</b>

**CERTIFICATION AND RECONCILIATION OF CLAIMS PAYMENTS AND RECOVERIES**

**Metro Employee Benefits Fund**

Month		August								
Current Fund Year		2025								
		1.	2.	3.	4.	5.	6.	7.	8.	
		Calc. Net	Monthly	Monthly	Calc. Net	TPA Net	Variance	Delinquent	Change	
Policy	Coverage	Paid Thru	Net Paid	Recoveries	Paid Thru	Paid Thru	To Be	Unreconciled	This	
Year		Last Month	August	August	August	August	Reconciled	Variance From	Month	
2025	Medical	32,108,511.17	6,390,590.79	0.00	38,499,101.96	0.00	38,499,101.96	32,108,511.17	6,390,590.79	
	Dental	734,840.59	123,726.91	0.00	858,567.50	0.00	858,567.50	734,840.59	123,726.91	
	Rx	2,446,020.84	267,347.07	0.00	2,713,367.91	0.00	2,713,367.91	2,446,020.84	267,347.07	
	Vision	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	<b>Total</b>	<b>35,289,372.60</b>	<b>6,781,664.77</b>	<b>0.00</b>	<b>42,071,037.37</b>	<b>0.00</b>	<b>42,071,037.37</b>	<b>35,289,372.60</b>	<b>6,781,664.77</b>	

**RESOLUTION NO. 30-25**

**METROPOLITAN HEALTH INSURANCE FUND  
APPROVAL OF THE OCTOBER AND NOVEMBER 2025 BILLS LIST**

**WHEREAS**, the **Metropolitan Health Insurance Fund** held a Public Meeting on **November 10, 2025** 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 2025 for consideration and approval of the Executive Committee and

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

**NOW THEREFORE BE IT RESOLVED** that the Metropolitan Health Insurance Fund hereby approve the Bills List for October and November 2025 prepared by the Treasurer of the Fund and duly authorize and concur said bills to be paid expeditiously, in accordance with the laws and regulations promulgated by the State of New Jersey for Insurance Funds.

**ADOPTED: November 10, 2025**

**BY:** \_\_\_\_\_  
**CHAIRPERSON**

**ATTEST:**  
  
\_\_\_\_\_  
**SECRETARY**



**METRO CLAIMS**

**Monthly Claim Activity Report**

***November 10, 2025***



**METRO**

	<b>MEDICAL CLAIMS PAID 2024</b>	<b># OF EES</b>	<b>PER EE</b>	<b>MEDICAL CLAIMS PAID 2025</b>	<b># OF EES</b>	<b>PER EE</b>
JANUARY	\$724,016	2,682	\$ 270	\$4,688,076	2,369	\$ 1,979
FEBRUARY	\$3,974,566	2,658	\$ 1,495	\$4,919,355	2,436	\$ 2,019
MARCH	\$5,419,303	2,666	\$ 2,033	\$5,699,838	2,426	\$ 2,349
APRIL	\$6,007,197	2,624	\$ 2,289	\$7,407,692	2,431	\$ 3,047
MAY	\$4,346,049	2,630	\$ 1,652	\$7,222,409	2,434	\$ 2,967
JUNE	\$5,971,793	2,627	\$ 2,273	\$6,588,676	2,433	\$ 2,708
JULY	\$6,220,272	2,649	\$ 2,348	\$4,979,246	2,440	\$ 2,041
AUGUST	\$4,753,326	2,643	\$ 1,798	\$6,844,995	2,438	\$ 2,808
SEPTEMBER	\$4,750,184	2,627	\$ 1,808	\$6,588,652	2,405	\$ 2,740
OCTOBER	\$5,943,377	2,713	\$ 2,191			
NOVEMBER	\$5,722,476	2,719	\$ 2,105			
DECEMBER	\$6,521,762	2,118	\$ 3,079			
<b>TOTALS</b>	<b>\$60,354,319</b>			<b>\$54,938,939</b>		
				<b>2025 Average</b>	<b>2,424</b>	<b>\$ 2,518</b>
				<b>2024 Average</b>	<b>2,613</b>	<b>\$ 1,945</b>



**RUN OUT**

	<b><u>MEDICAL CLAIMS PAID 2025</u></b>	<b><u># OF EES</u></b>	<b><u>PER EE</u></b>				
JANUARY	\$194,623	2,369	\$ 82				
FEBRUARY	\$106,504	2,436	\$ 44				
MARCH	\$67,081	2,426	\$ 28				
APRIL	\$75,116	2,431	\$ 31				
MAY	\$278,804	2,434	\$ 115				
JUNE	\$40,812	2,433	\$ 17				
JULY	-\$9,448	2,440	\$ (4)				
AUGUST	\$5,435	2,438	\$ 2				
SEPTEMBER	\$2,085	2,405	\$ 1				
OCTOBER							
NOVEMBER							
DECEMBER							
<b>TOTALS</b>	<b>\$761,011</b>						

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

**Plan Sponsor Unique ID :** All  
**Customer:** METRO  
**Group / Control:** 00232370,00232371 - METRO FUND

**Paid Dates:** 09/01/2025 - 09/30/2025  
**Service Dates:** 01/01/2011 - 09/30/2025  
**Line of Business:** All

	<b>Paid Amt</b>	<b>Diagnosis/Treatment</b>
	\$161,688.96	ALCOHOL DEPENDENCE, UNCOMPLICATED
	\$133,421.50	FEVER, UNSPECIFIED
	\$131,906.56	NEUROPATHIC HEREDOFAMILIAL
	\$119,752.31	SPONDYLOSIS WITHOUT MYELOPATHY OR
	\$111,411.68	MALIGNANT NEOPLASM OF OVERLAPPING SITES OF
	\$101,955.98	MALIGNANT NEOPLASM OF OVERLAPPING SITES OF
<b>Total:</b>	<b>\$760,136.99</b>	



### Metropolitan Health Insurance Fund

10/1/24 thru 9/30/25 (unless otherwise noted)

## Dashboard

**Medical Claims Paid:**  
**January 2025 thru September 2025**  
 Total Medical Paid per EE: **\$2,518**

*\* Claims Run-Out under old BMED control*

**Network Discounts**

Inpatient:	<b>67.4%</b>
Ambulatory:	<b>65.9%</b>
Physician/Other:	<b>64.0%</b>
<b>TOTAL:</b>	<b>65.4%</b>

**Provider Network**

% Admissions In-Network:	<b>94.5%</b>
% Physician Office:	<b>91.2%</b>

**Aetna Book of Business:**  
 Admissions 97.5%; Physician 91.9%

**Top Facilities Utilized**  
 (by total Medical Spend)

- JFK University Medical Center
- Overlook Medical Center
- Cooperman Barnabas Medical Ctr
- RWJUH New Brunswick
- Morristown Medical Center
- Hackensack University Medical Ctr

**Catastrophic Claim Impact**  
**January 2025 – September 2025**

Number of Claims Over \$50,000: **174**  
 Claimants per 1000 members: **31.0**  
 Avg. Paid per Claimant: **\$153,919**  
 Percent of Total Paid: **51.0%**

- Aetna BOB- HCC account for an average of 45.6% of total Medical Cost

**Aetna One Flex Care Mgmt**  
**Member Outreach:**

Total Members Identified: **1,900** (26.3%)  
 Members Targeted for 1:1 Nurse Support : **403** (21.4% engaged)  
 Members identified for Digital Activity: **1,497** (79.1%)  
 Members receiving Aetna Advice: **1,511** (24.5%)  
 Average Aetna Advice outreaches per member: **1.4**

**CVS Health. CVS Virtual Care**  
**January 2025 – September 2025**

Completed Visits: **9**  
 Unique Patients : **9**  
 Completed Visits in 2025 : **147**  
 Unique Patients in 2025: **92**  
 Total Scheduled Visits in 2025: **197**  
 Average visit duration: **10** Minutes  
 BoB: Average First Available: **25** minutes  
 BoB: Average First Available (8am-6pm) **20** Minutes

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

**Customer Service Performance**

1st Call Resolution:	<b>93.85%</b>
Abandonment Rate:	<b>0.50%</b>
Avg. Speed of Answer:	<b>13.8 sec</b>

**Claims Performance**

Financial Accuracy:	<b>98.23%*</b>
<small>*Q1 2025</small>	
-	
90% processed w/in:	<b>7.8 days</b>
95% processed w/in:	<b>15.5 days</b>

\*\*\*\*\*

**Claims Performance (Monthly)**  
 (September 2025)

90% processed w/in:	<b>6.7 days</b>
95% processed w/in:	<b>16.5 days</b>

(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®**

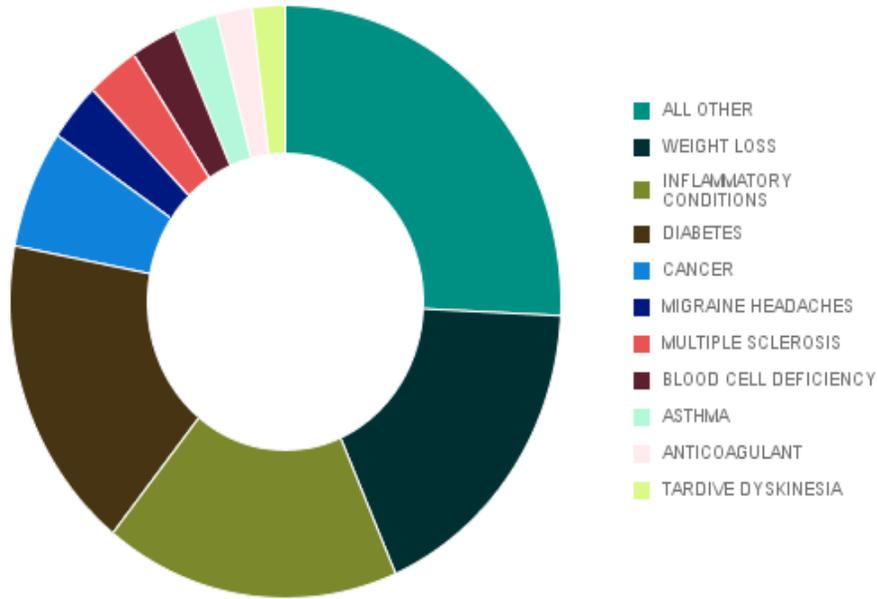
Total Component/Date of Service (Month)	2024 01	2024 02	2024 03	2024 Q1	2024 04	2024 05	2024 06	2024 Q2	2024 07	2024 08	2024 09	2024 Q3	2024 10	2024 11	2024 12	2024 Q4	2024 YTD
Membership	972	963	960	965	970	965	957	964	946	947	952	948	968	990	984	981	965
Total Days	24,314	27,528	27,455	79,297	29,053	32,052	27,820	88,925	30,797	29,467	30,030	90,294	34,030	32,808	35,417	102,255	360,771
Total Patients	284	292	308	465	318	308	301	485	303	307	315	469	357	353	362	539	715
Total Plan Cost	\$153,801	\$106,316	\$117,731	\$377,849	\$138,031	\$171,454	\$156,213	\$465,697	\$205,353	\$187,823	\$167,234	\$560,409	\$274,108	\$179,016	\$214,628	\$667,752	\$2,071,708
Generic Fill Rate (GFR) - Total	86.2%	85.8%	86.1%	86.0%	86.5%	84.1%	84.0%	84.9%	83.7%	80.2%	80.4%	81.5%	81.2%	84.4%	81.9%	82.5%	83.6%
Plan Cost PMPM	\$158.23	\$110.40	\$122.64	\$130.52	\$142.30	\$177.67	\$163.23	\$161.03	\$217.07	\$198.33	\$175.67	\$196.98	\$283.17	\$180.82	\$218.12	\$226.97	\$179.00
Total Specialty Plan Cost	\$80,389	\$23,717	\$27,003	\$131,108	\$54,301	\$37,700	\$48,055	\$140,057	\$76,068	\$71,220	\$48,563	\$195,851	\$161,184	\$53,548	\$70,817	\$285,549	\$752,565
Specialty % of Total Specialty Plan Cost	52.3%	22.3%	22.9%	34.7%	39.3%	22.0%	30.8%	30.1%	37.0%	37.9%	29.0%	34.9%	58.8%	29.9%	33.0%	42.8%	36.3%

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	1,583	1,745	1,738	1,689	1,736	1,735	1,736	1,736	1,736	1,739	1,737	1,737					
Total Days	59,833	60,345	70,456	190,634	65,736	61,053	61,382	188,171	58,914	60,428	60,565	179,907					
Total Patients	550	598	602	927	596	543	555	895	540	544	558	867					
Total Plan Cost	\$360,333	\$263,585	\$400,194	\$1,024,112	\$369,565	\$337,451	\$414,442	\$1,121,458	\$415,010	\$369,278	\$335,695	\$1,119,982					
Generic Fill Rate (GFR) - Total	85.1%	84.0%	82.7%	83.9%	84.6%	84.0%	84.2%	84.3%	83.7%	83.5%	79.6%	82.2%					
Plan Cost PMPM	\$227.63	\$151.05	\$230.26	\$202.15	\$212.88	\$194.50	\$238.73	\$215.38	\$239.06	\$212.35	\$193.26	\$214.89					
% Change Plan Cost PMPM	43.9%	36.8%	87.8%	54.9%	49.6%	9.5%	46.3%	33.7%	10.1%	7.1%	10.0%	9.1%					
Total Specialty Plan Cost	\$144,724	\$50,528	\$138,310	\$333,561	\$144,054	\$107,491	\$196,191	\$447,736	\$165,644	\$132,113	\$111,477	\$409,234					
Specialty % of Total Specialty Plan Cost	40.2%	19.2%	34.6%	32.6%	39.0%	31.9%	47.3%	39.9%	39.9%	35.8%	33.2%	36.5%					

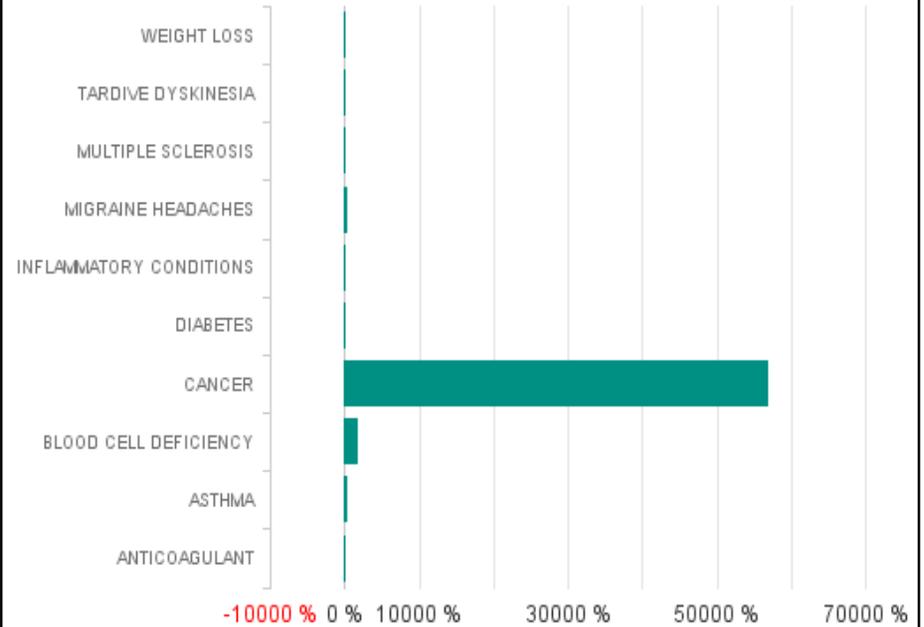
## Top Indications

Metropolitan Health Insurance (Current Period 01/2025 - 09/2025 vs. Previous Period 01/2024 - 09/2024) 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	4	WEIGHT LOSS	23.8 %	534	\$578,286	\$37.34	1.3 %	4.0 %	28.5 %	247	\$269,015	\$31.16	0.4 %	5.3 %	19.8 %
2	2	INFLAMMATORY CONDITIONS	23.3 %	233	\$565,156	\$36.50	55.4 %	29.2 %	22.5 %	94	\$212,096	\$24.57	57.4 %	33.1 %	48.5 %
3	1	DIABETES	23.2 %	1,684	\$563,585	\$36.40	32.5 %	23.6 %	23.6 %	711	\$222,002	\$25.72	36.3 %	25.6 %	41.5 %
4	3	CANCER	8.7 %	58	\$211,115	\$13.63	82.8 %	75.5 %	0.0 %	38	\$207	\$0.02	100.0 %	75.9 %	56824.0 %
5	5	MIGRAINE HEADACHES	4.3 %	146	\$103,657	\$6.69	36.3 %	51.1 %	2.0 %	36	\$18,649	\$2.16	58.3 %	52.5 %	209.9 %
6	7	MULTIPLE SCLEROSIS	4.1 %	16	\$99,534	\$6.43	56.3 %	47.5 %	11.2 %	17	\$105,582	\$12.23	47.1 %	48.0 %	-47.4 %
7	9	BLOOD CELL DEFICIENCY	3.7 %	10	\$89,323	\$5.77	40.0 %	13.1 %	0.3 %	1	\$3,127	\$0.36	0.0 %	0.8 %	1492.4 %
8	6	ASTHMA	3.4 %	722	\$82,391	\$5.32	85.9 %	88.0 %	2.1 %	334	\$19,811	\$2.30	89.2 %	87.9 %	131.8 %
9	8	ANTICOAGULANT	2.8 %	141	\$67,797	\$4.38	9.2 %	18.4 %	3.3 %	89	\$31,511	\$3.65	7.9 %	18.9 %	19.9 %
10	10	TARDIVE DYSKINESIA	2.6 %	10	\$63,880	\$4.13	0.0 %	6.5 %	6.4 %	10	\$60,452	\$7.00	0.0 %	7.1 %	-41.1 %
<b>Total Top 10</b>				<b>3,554</b>	<b>\$2,424,725</b>	<b>\$156.59</b>	<b>40.2 %</b>	<b>38.5 %</b>		<b>1,577</b>	<b>\$942,452</b>	<b>\$109.18</b>	<b>43.4 %</b>	<b>41.4 %</b>	<b>43.4 %</b>

## Top Drugs

Metropolitan Health Insurance (Current Period 01/2025 - 09/2025 vs. Previous Period 01/2024 - 09/2024) 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	6	ZEPBOUND	WEIGHT LOSS	N	332	51	\$337,149	\$21.77	113	18	\$110,985	\$12.86	69.3 %
2	11	WEGOVY	WEIGHT LOSS	N	191	33	\$239,985	\$15.50	127	24	\$157,151	\$18.21	-14.9 %
3	200	SCEMBLIX	CANCER	Y	10	1	\$210,786	\$13.61	NA	NA	NA	NA	NA
4	1	MOUNJARO	DIABETES	N	146	22	\$147,525	\$9.53	35	7	\$34,337	\$3.98	139.5 %
5	4	OZEMPIC	DIABETES	N	133	19	\$119,876	\$7.74	86	14	\$75,189	\$8.71	-11.1 %
6	9	SKYRIZI PEN	INFLAMMATORY CONDITIONS	Y	16	2	\$115,069	\$7.43	1	1	\$14,521	\$1.68	341.7 %
7	25	SKYRIZI ON-BODY	INFLAMMATORY CONDITIONS	Y	10	1	\$105,245	\$6.80	6	1	\$49,786	\$5.77	17.8 %
8	10	JARDIANCE	DIABETES	N	144	19	\$82,697	\$5.34	50	7	\$27,778	\$3.22	66.0 %
9	128	VUMERITY	MULTIPLE SCLEROSIS	Y	7	1	\$64,804	\$4.18	9	1	\$62,807	\$7.28	-42.5 %
10	183	INGREZZA	TARDIVE DYSKINESIA	Y	10	1	\$63,880	\$4.13	10	1	\$60,452	\$7.00	-41.1 %
11	177	SOTYKTU	INFLAMMATORY CONDITIONS	Y	9	1	\$54,037	\$3.49	NA	NA	NA	NA	NA
12	122	PROMACTA	BLOOD CELL DEFICIENCY	Y	5	1	\$48,957	\$3.16	NA	NA	NA	NA	NA
13	16	ENBREL SURECLICK	INFLAMMATORY CONDITIONS	Y	7	1	\$47,477	\$3.07	NA	NA	NA	NA	NA
14	243	HUMIRA(CF)	INFLAMMATORY CONDITIONS	Y	8	1	\$46,287	\$2.99	NA	NA	NA	NA	NA
15	173	ACTEMRA ACTPEN	INFLAMMATORY CONDITIONS	Y	10	1	\$45,885	\$2.96	11	1	\$40,401	\$4.68	-36.7 %
16	21	ELIQUIS	ANTICOAGULANT	N	85	13	\$41,750	\$2.70	57	9	\$18,630	\$2.16	24.9 %
17	273	ELTROMBOPAG OLAMINE	BLOOD CELL DEFICIENCY	Y	4	1	\$39,726	\$2.57	NA	NA	NA	NA	NA
18	31	NURTEC ODT	MIGRAINE HEADACHES	N	25	7	\$38,957	\$2.52	7	3	\$11,965	\$1.39	81.5 %
19	159	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS	Y	9	1	\$34,730	\$2.24	8	1	\$42,776	\$4.96	-54.7 %
20	33	HUMIRA(CF) PEN	INFLAMMATORY CONDITIONS	Y	6	1	\$33,999	\$2.20	10	1	\$54,665	\$6.33	-65.3 %
21	23	FARXIGA	DIABETES	N	62	9	\$33,053	\$2.13	16	3	\$8,297	\$0.96	122.1 %
22	32	TRULICITY	DIABETES	N	34	6	\$31,459	\$2.03	16	3	\$14,557	\$1.69	20.5 %
23	46	XOLAIR	ASTHMA	Y	13	2	\$31,313	\$2.02	NA	NA	NA	NA	NA
24	40	QULIPTA	MIGRAINE HEADACHES	N	29	5	\$30,761	\$1.99	2	1	\$1,872	\$0.22	816.0 %
25	334	BIMZELX	INFLAMMATORY CONDITIONS	Y	5	1	\$28,518	\$1.84	NA	NA	NA	NA	NA
<b>Total Top 25</b>					<b>1,310</b>		<b>\$2,073,924</b>	<b>\$133.93</b>	<b>564</b>		<b>\$786,169</b>	<b>\$91.08</b>	<b>47.1 %</b>

# APPENDIX I

**METROPOLITAN HEALTH INSURANCE FUND**

**MINUTES**

**OPEN MEETING: SEPTEMBER 18, 2025**

**CONFERENCE CALL - ZOOM**

**12:00 P.M.**

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

**PLEDGE OF ALLEGIANCE**

**ROLL CALL OF 2025 EXECUTIVE COMMITTEE**

Jenny Mundell, Chairwoman	Bloomfield Public Library	Present
Kimberly Duva, Secretary	Bloomfield Township	Present
Cameron Cox, Executive Committee Member	Plainfield Public Schools	Present
Nicole Baltycki, Executive Committee Member	West Caldwell Township	Present
Chris Hartwyk, Executive Committee Member	City of Orange	Present
Margaret Heisey, Executive Committee Member	Scotch Plains Twp	Present
Patrick Wherry, Executive Committee Member	Maplewood Township	Present

**APPOINTED OFFICIALS PRESENT:**

Executive Director/ Administrator	<b>PERMA Risk Management Services</b>	Brandon Lodics Emily Koval John Lajewski Crystal Bailey
Fund Coordinator	<b>Eagle Rock Management Group</b>	Joseph DiVincenzo Jennifer McHugh Thomas Kelly Diane Romano
Attorney	<b>Antonelli Kantor Rivera</b>	Asia Hartgrove
Treasurer	<b>Point Accounting Group (Formerly Laracy Associates)</b>	Matt Laracy
Third Party Administrator	<b>Aetna</b>	Jason Silverstein
Dental Claims Administrator	<b>Delta Dental of NJ, Inc.</b>	Crista O'Donnell
Auditor	<b>Donohue, Gironda, Doria &amp; Tomkins</b>	Mauricio Canto
Actuary	<b>John Vataha</b>	Absent
RX Administrator	<b>Express Scripts</b>	Hiteksha Patel

Others Present:

Alysa Sauchelli  
 Alexander McDonald  
 Matt Boxer  
 Brian Kiely  
 Jacob Krakower  
 John Ditinyak  
 Joseph DiBella  
 Julie Servidio  
 Jordyn Robinson

Capriglione  
 Carrie Specht  
 Lisa Narcise  
 Matt Rudman  
 Thomas Kelly  
 Timothy Hoffman  
 Stacie Chant  
 Thomas Tafuri

**APPROVAL OF MINUTES:** September 8, 2025 Finance Committee Meeting

**Motion:** Commissioner Hartwyk  
**Second:** Commissioner Cox  
**Vote:** All in Favor

**CORRESPONDENCE - None**

**EXECUTIVE DIRECTOR’S REPORT**

**FAST TRACK FINANCAL REPORT -** Mrs. Koval, presented her report. She noted that for the first time this year the Fund ended the month with a surplus of approximately \$460,000, though the statutory surplus still reflected a deficit of about \$9.2 million. She highlighted that a specific excess reimbursement had positively impacted the month’s results.

**BUDGET UPDATE**

Below is a timeline for the 2026 Budget Process:

Date	Phase
9/26/2025	Internal Review Complete; Draft Budget to Finance Committee
9/29/2025	Finance Committee Meets
10/1/2025	Draft Budget and Agenda to Executive Committee
10/3/2025	Executive Committee to Introduce Budget
10/13/2025	Draft Rates to Members
TBD (no earlier than 10/31/2025)	Public Hearing; Budget Adoption; Rates are Final
11/30/2025	Due Date for Budget Filing

Mrs. Koval also provided an update on the upcoming budget, acknowledging difficult conditions statewide but confirming that the Finance Committee would meet later in the month to review the draft. She outlined the schedule for budget introduction, rate distribution, and adoption before the October 31 deadline

## AUDIT

Mrs. Koval reported that the Finance Committee had reviewed and approved the revised audit, which was subsequently submitted to the State. She requested the Board's approval of Resolution 19-25 ratifying the audit.

A motion to approve the audit was made by **Mr. Wheary** and seconded by **Mrs. Baltycki**. A roll call vote was conducted by Mrs. Robinson, with **Mr. Wheary, Mr. Hartwyck, Mrs. Baltycki, Mr. Cox, Mrs. Duva, and Chair Mundell** all voting in favor. The motion carried unanimously.

**ATTORNEY – Mr. Rivera**, Fund Counsel, provided an overview of the recent report from the Office of the State Comptroller, which addressed the Metro HIF along with other HIFs in New Jersey. Mr. Rivera explained that the matter would be discussed further in closed session, with the participation of Commissioners, alternates, PERMA representatives, and Fund Counsel. After discussion regarding the inclusion of vendors and brokers, it was determined that only Commissioners, alternates or their staff, PERMA, and Connor Strong representatives would remain for the closed session. A motion to enter closed session under these restrictions was made by **Mr. Cox** and seconded by **Mr. Wheary**. All were in favor, and the motion carried.

**OLD BUSINESS** - None

**NEW BUSINESS** - None

**PUBLIC COMMENT** - None

### **MOTION TO ADJOURN THE MEETING:**

**Motion:** Commissioner Cox  
**Second:** Commissioner Hartwyck  
**Vote:** All in Favor

**MEETING ADJOURNED: 12:59 pm**

**NEXT MEETING: October 3, 2025 12:00PM**

**Zoom**

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Jordyn Robinson, Assisting Secretary

for

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**KIMBERLY DUVA, SECRETARY**

# APPENDIX II

**METROPOLITAN HEALTH INSURANCE FUND  
MINUTES  
OPEN MEETING: OCTOBER 3, 2025  
CONFERENCE CALL - ZOOM  
12:00 P.M.**

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

**PLEDGE OF ALLEGIANCE**

**ROLL CALL OF 2025 EXECUTIVE COMMITTEE**

Jenny Mundell, Chairwoman	Bloomfield Public Library	Present
Kimberly Duva, Secretary	Bloomfield Township	Present
Cameron Cox, Executive Committee Member	Plainfield Public Schools	Present
Nicole Baltycki, Executive Committee Member	West Caldwell Township	Present
Chris Hartwyk, Executive Committee Member	City of Orange	Absent
Margaret Heisey, Executive Committee Member	Scotch Plains Twp	Present
Patrick Wherry, Executive Committee Member	Maplewood Township	Present

**APPOINTED OFFICIALS PRESENT:**

Executive Director/ Administrator	<b>PERMA Risk Management Services</b>	Brandon Lodics Emily Koval John Lajewski Crystal Bailey Joseph DiBella
Fund Coordinator	<b>Eagle Rock Management Group</b>	Joseph DiVincenzo Jennifer McHugh Thomas Kelly Diane Romano
Attorney	<b>Antonelli Kantor Rivera</b>	Asia Hartgrove Ramon Rivera
Treasurer	<b>Point Accounting Group (Formerly Laracy Associates)</b>	Matt Laracy
Third Party Administrator	<b>Aetna</b>	Jason Silverstein
Dental Claims Administrator	<b>Delta Dental of NJ, Inc.</b>	Crista O'Donnell
Auditor	<b>Donohue, Gironda, Doria &amp; Tomkins</b>	Absent
Actuary	<b>John Vataha</b>	Absent
RX Administrator	<b>Express Scripts</b>	Charles Yuk

Others Present:

Jim Rhodes	Tom Fletcher	Julie Servidio
Jordyn Robinson	Timothy Hoffman	John Ditinyak
Matt Rudman	Susan Sandelli	Jenna Bauer
Paul McGowan	Philip Chiyuto	Jacob Krakower
Tammy Brown	Lindsay - Acrisure	Carmine Sarno
K Capriglione	Katherine Polanco	Alysa Sauchelli

Emily Koval apologized for the delay in distributing the agenda and minutes, noting that future efforts will ensure documents are sent out at least five days prior to meetings. Commissioners agreed to table the approval of minutes until the next meeting.

**CORRESPONDENCE** - None

**EXECUTIVE DIRECTOR'S REPORT**

**FAST TRACK FINANCAL REPORT** - Mrs. Koval reviewed the July 2025 stating that there was a deficit of \$106,000 through July 2025, with a statutory surplus of \$9.3 million.

**BUDGET INTRODUCTION**

Mr. DiBella presented the proposed 2026 Metropolitan Health Insurance Fund budget, which had been reviewed by the Finance. He began with a marketplace overview, explaining that both school districts and local government units in the Metro Fund are facing significant health benefit cost pressures, describing this as the hardest market in roughly a decade. The recommended increases are 19.3% for medical and 18.1% for pharmacy, reflecting current trends. While these levels are challenging, Mr. DiBella noted that the Metro Fund is performing better than many other public and private programs. He contrasted the Fund's experience with the State Health Benefits Program, which has experienced substantial losses, and observed that public and private sector employers are generally seeing increases in the range of 15-25%.

He outlined specific factors impacting the Metro Fund, including an 11% increase in hospital admissions, along with corresponding increases in surgeries, office visits, emergency room utilization, and claims over \$50,000, indicating more complex and catastrophic conditions among members. Out-of-network utilization remains a major cost driver, with approximately 30% of paid dollars going to out-of-network providers despite a broad in-network provider base. Earlier in the year, the Fund adopted an out-of-network reimbursement schedule of 175% of Medicare for hospitals and 150% for physicians, which has already produced noticeable declines in related fees and costs. However, out-of-network utilization continues to be a significant issue, particularly in northern New Jersey.

On the pharmacy side, Mr. DiBella reported a 43% increase in costs, driven largely by GLP-1 weight-loss medications. Across all New Jersey health insurance funds, approximately \$50 million has been spent over two years on weight-loss drugs, with GLP-1 utilization within the Metro Fund increasing by more than 100%. He stressed that this trend is financially unsustainable and may require broader policy or legislative action.

Mr. DiBella explained the impact of the federal No Surprises Act. Implementation delays at the federal level created a backlog of arbitration decisions, resulting in three and a half years' worth of claims being released and billed at once, with roughly \$6-7 million in related claims hitting the Metro Fund in a short period. Nationally, providers prevail in approximately 85% of these arbitrations, driving up costs for all plan sponsors. This unexpected backlog could not reasonably have been budgeted for and has materially affected the Fund's current position. The Fund is exploring moving from the federal No Surprises Act process to New Jersey's state-level process, which may be more favorable or cost-effective. Legal counsel has confirmed that such a transition is permissible. Additionally, hospitals statewide have secured sizable increases in reimbursement from all carriers, citing higher labor and operating costs, which are being felt almost immediately in the Fund's claims experience.

The proposed budget reflects an 18.58% total increase, covering medical, prescription, dental claims, MRHIF stop-loss coverage, fully insured Medicare Advantage costs, and a recommended \$1.5 million allocation for surplus regeneration. Surplus rebuilding is necessary to protect the Fund against adverse claim years, as prior claim challenges, including those related to the City of Orange, have eroded the Fund's surplus. Without anomalous factors such as out-of-network patterns, the No Surprises Act backlog, and GLP-1 drug costs, the actuary estimates the required increase would have been approximately 14%, which is on the lower end of what is being seen in the current market. The Fund is also evaluating lower-cost plan options for employees, particularly for those paying Chapter 78 contributions on the non-educator side, and plans to issue an RFP for TPA services in early 2025 to explore alternative solutions.

Mrs. Mundell requested entity-specific cost breakdowns to help commissioners report back accurately to their governing bodies. Mr. Cox emphasized the importance of documenting that the No Surprises Act charges reflect multiple years of claims being billed at once, not just a single year. Mr. DiBella reiterated that the federal government's delay in operationalizing the program resulted in a nationwide backlog, and when arbitrators and systems were finally in place, several years of claims were processed and billed in a short window, creating an extraordinary financial impact for all HIFs. He noted that the HIFs have written to the New Jersey congressional delegation urging that the law be revisited.

Discussion included potential additional assessments for prior fund years. Mr. DiBella explained that each fund year must be reconciled once claims and expenses are fully known. The 2024 fund year is still being finalized, and there may be a deficit requiring an additional assessment from member entities. Options include spreading payments over 24-36 months or incorporating them into future rates. Any such assessment would be distinct from, but additive to, the 2026 budget obligations. The Board discussed savings from out-of-network reimbursement changes, which have already reduced negotiation fees significantly. Preliminary estimates suggest a 4% reduction in out-of-network costs, with conservative budgeting allowing for surplus generation and appeal reimbursements.

Mrs. Duva raised concerns about funding the Guardian Nurses program, a nurse case management initiative focused on catastrophic and chronic conditions, citing broader financial pressures. Mr. DiBella explained the program's approximate 4-to-1 ROI and its role in managing high-dollar claims but acknowledged implementation could be delayed if necessary. ROI studies will be shared with commissioners for review. Mr. Lodics clarified that the overall expense increase is modest at the fund-wide level, and adjustments of up to 5% can be made before final adoption.

The Board scheduled the public hearing and adoption meeting for November 10 at 11:00 a.m., with a motion passed to introduce the 2026 budget totaling \$106,612,138. Commissioners will receive entity-specific cost breakdowns, ROI materials for the Guardian Nurses program, and supplemental assessment analysis for the 2024 fund year prior to adoption.

*Motion to approve Resolution 24-25 the introduction of the 2026 Metropolitan Health Insurance Fund Budget of \$106,612,138 and a public hearing for November 10, 2025 at 11:00am via ZOOM*

**Motion:** Commissioner Cox  
**Second:** Commissioner Heisey  
**Vote:** 6 Ayes, 0 Nays

**TREASURER** – Approval of Resolution 25-25 September 2025 Bills List

**Motion:** Commissioner Cox  
**Second:** Commissioner Heisey  
**Vote:** 6 Ayes, 0 Nays

**PROGRAM MANAGERS REPORT** - Ms. Bailey advised that the Metro open enrollment period will run from October 27 through November 7, and that all updates must be completed in WEX by November 21 to ensure that any members needing new identification cards receive them by January 1. She noted that, at the time the agenda was prepared, enrollment materials were not yet available, but they were sent out yesterday to all brokers. Ms. Bailey stated that brokers have been asked to advise if they do not wish to send the materials directly to their groups, in which case the program manager’s office will send them to the groups individually within approximately a week. She further emphasized that the open enrollment dates are flexible upon request, particularly in light of the later timing of the budget and the need for some entities to present information to their populations; she invited commissioners to contact her if alternate dates would better accommodate their needs. Ms. Bailey concluded by noting that this open enrollment update was the only change to the Program Manager’s report.

**FUND COODINATOR** - Mr. DiVincenzo delivered the Fund Coordinator’s report. He noted that, due to time constraints, he would provide a concise update. Mr. DiVincenzo reported that the Fund is anticipating the addition of four new entities to Metro membership, representing approximately 810 contracts for active and early-retiree populations. In addition, there are three Medicare-eligible groups currently pending approval to join, representing approximately 1,200 contracts. Altogether, if all pending memberships are finalized, the Fund expects to add roughly 2,000 contracts effective January 1, 2026.

**ATTORNEY** – No Report

**AETNA** – Mr. Silverstein stated that the report is included the agenda and he is open to any questions.

**EXPRESS SCRIPTS** – Mr. Yuk presented the Pharmacy Benefit Manager report. He noted that, given the ongoing discussion surrounding GLP-1 medications, he wanted to provide a brief update specific to those drugs. Mr. Yuk explained that, although the Fund is continuing to experience increased utilization of weight-loss GLP-1s such as Wegovy and Zepbound, the pharmacy program’s prior authorization process is actively screening and denying prescriptions that do not meet clinical criteria.

He referenced the table in the report covering the period from January through July 2025, highlighting that while utilization has risen, the number of denials has also increased, indicating that controls are functioning as intended. Specifically, he noted that 18 and 19 requests for Wegovy and Zepbound, respectively, were denied because the patients did not meet the minimum body mass index (BMI) threshold of 32 required for coverage. Mr. Yuk concluded by stating that enhanced reporting with more detailed data will be available for the next meeting and offered to answer any questions.

**DELTA DENTAL** - Ms. O'Donnell provided the dental carrier report. She stated that Delta Dental has expanded its value-added discount offerings through a new initiative called Wellness Perks. Under this program, enrolled members will have access to exclusive discounts from participating vendors – these are not insurance claims but rather direct savings opportunities for members. The discounts apply to items such as electric toothbrushes, pediatric dental care kits, and mouthguards for children.

Ms. O'Donnell explained that members can access the program by logging into the Delta Dental website, where they will be prompted to register and receive a discount code that unlocks all available vendor offers.

Ms. Bailey added that the Wellness Perks flyer has been included in the open enrollment materials recently distributed to brokers and member groups.

**OLD BUSINESS** - None

**NEW BUSINESS** - Mr. Wherry raised a question regarding recent updates from the State Health Benefits Plan Design Committee concerning prescription plan changes. He noted that the Committee's adopted modifications appeared to be positive steps toward cost control and inquired how these changes might affect the Fund – specifically, whether the Metro Fund could adopt similar measures and whether such adoption would require review of every member entity's labor contracts.

Mr. DiBella responded that the ability to implement these design changes will vary by entity. He explained that if a collective bargaining agreement or employment contract contains language stating that the employer's benefits shall be "equal to or greater than" those of the State Health Benefits Plan, then the employer would generally have the latitude to adopt the state's new prescription design changes automatically, provided that proper notice is given to the affected unions. However, if a contract lacks that explicit reference, the employer likely cannot make those changes unilaterally and would need to engage in negotiation.

He advised all member entities to review their bargaining agreements promptly and offered the Fund professionals' assistance in evaluating the relevant language. Mr. DiBella further explained that any savings realized from adopting the state's prescription design changes would be applied individually – meaning that only those entities that implement the change would receive the corresponding rate reduction. For example, if five groups within the Metro Fund qualify to adopt the change and it results in a 4% reduction, those specific entities would benefit from the lower rate, while others would not.

Mr. Wherry asked that written instructions be distributed outlining the process and timing, noting the importance of coordination across entities and suggesting a January 1 effective date consistent with the state's implementation. Mr. DiBella agreed, acknowledging that January 1 would be the ideal date for uniformity, although changes could technically be made at any time during the year. He stated that a memorandum will be prepared and distributed through Ms. Koval and Mr. Lodics detailing the recommended process, timelines, and considerations for entities reviewing this option. He confirmed that such plan design changes would affect renewal rates and emphasized that time is of the essence to act before rates are finalized.

Mr. Wherry thanked Mr. DiBella for the clarification, and Mr. DiBella, in turn, thanked Mr. Wherry for raising the issue. Mrs. Mundell expressed appreciation for the discussion and moved the meeting forward.

**PUBLIC COMMENT - None**

**MOTION TO ADJOURN THE MEETING:**

**Motion:** Commissioner Cox  
**Second:** Commissioner Wherry  
**Vote:** All in Favor

**MEETING ADJOURNED: 12:59 pm**

**NEXT MEETING: November 10, 2025 11:00AM**

**Zoom**

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Jordyn Robinson, Assisting Secretary

for

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**KIMBERLY DUVA, SECRETARY**

# APPENDIX III

**METROPOLITAN HEALTH INSURANCE FUND  
MINUTES  
OPEN MEETING: OCTOBER 29, 2025  
SPECIAL MEETING  
CONFERENCE CALL - ZOOM  
9:30 A.M.**

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

**PLEDGE OF ALLEGIANCE**

**ROLL CALL OF 2025 EXECUTIVE COMMITTEE**

Jenny Mundell, Chairwoman	Bloomfield Public Library	Present
Kimberly Duva, Secretary	Bloomfield Township	Present
Cameron Cox, Executive Committee Member	Plainfield Public Schools	Present
Nicole Baltycki, Executive Committee Member	West Caldwell Township	Absent
Chris Hartwyk, Executive Committee Member	City of Orange	Absent
Margaret Heisey, Executive Committee Member	Scotch Plains Twp	Present
Patrick Wherry, Executive Committee Member	Maplewood Township	Present

**APPOINTED OFFICIALS PRESENT:**

Executive Director/ Administrator	<b>PERMA Risk Management Services</b>	Brandon Lodicis Emily Koval John Lajewski Crystal Bailey Joseph DiBella
Fund Coordinator	<b>Eagle Rock Management Group</b>	Joseph DiVincenzo Jennifer McHugh Thomas Kelly Diane Romano
Attorney	<b>Antonelli Kantor Rivera</b>	Asia Hartgrove Ramon Rivera
Treasurer	<b>Point Accounting Group (Formerly Laracy Associates)</b>	Matt Laracy
Third Party Administrator	<b>Aetna</b>	Jason Silverstein
Dental Claims Administrator	<b>Delta Dental of NJ, Inc.</b>	Crista O'Donnell
Auditor	<b>Donohue, Gironda, Doria &amp; Tomkins</b>	Absent
Actuary	<b>John Vataha</b>	Absent
RX Administrator	<b>Express Scripts</b>	Charles Yuk

Others Present:

Jim Rhodes	Tom Fletcher	Julie Servidio
Jordyn Robinson	Timothy Hoffman	John Ditinyak
Matt Rudman	Susan Sandelli	Jackie Ortiz
Anders Hasseler	Alysa Sauchelli	Nile Clements
Tammy Brown	Jenna Bauer	Joe Graham
K Capriglione	Katherine Polanco	Elizabeth Dash

**CORRESPONDENCE** - None

**EXECUTIVE DIRECTOR’S REPORT** - Mrs. Koval apologized for the late distribution of the agenda and explained that the meeting’s intent was to present financial status updates and options for addressing the fund deficit. However, additional time was required to consult with fund professionals and the Finance Committee before taking action. A meeting with the Finance Committee was scheduled prior to the November 12th meeting to finalize recommendations for the 2026 budget adoption.

Two action items were discussed during the meeting. The first item involved approving Resolution 26-25, which awarded the Qualified Purchasing Agent (QPA) contract to Sean Canning for the year 2025 at a fee of \$3,000. Commissioners raised questions regarding the lack of responses from other QPAs and the necessity of appointing an external QPA. After deliberation, the commissioners agreed to amend the resolution to approve the contract for 2025 only, excluding 2026.

*Motion to amend the resolution as noted:*

**Motion:** Commissioner Cox  
**Second:** Commissioner Heisey  
**Vote:** 5 Ayes, 0 Nays

*Motion to Approve Resolution 26-25:*

**Motion:** Commissioner Cox  
**Second:** Commissioner Heisey  
**Vote:** 5 Ayes, 0 Nays

Mrs. Koval reviewed the second action item concerned the medical Third-Party Administrator (TPA) procurement process. Due to delays caused by the Office of the State Comptroller (OSC), the fund was unable to issue a Request for Proposal (RFP) for the TPA within the required timeframe. As a result, the fund recommended proceeding with an emergency procurement process to secure a TPA for the upcoming year. Resolution 27-25, authorizing the emergency procurement, was presented and supported by legal counsel.

**RESOLUTION 27-25 MEDICAL TPA CONTRACT 2026 – EMERGENCY PROCUREMENT**

**Motion:** Commissioner Cox  
**Second:** Commissioner Heisey  
**Vote:** 5 Ayes, 0 Nays

**NO SURPRISE BILLING AND TRANSPARENCY ACT: UPDATE- TRANSITION TO STATE ARBITRATION - JANUARY 1, 2026** - Mrs. Koval provided an update on the impact of the No Surprises Act on the fund. She explained that transitioning from federal regulations to the New Jersey statute would offer greater transparency and predictability in claims processing. This change would be effective January 1, 2026, and new ID cards reflecting the state law would be issued as part of the open enrollment process. Commissioners raised concerns about potential confusion among employees regarding the new ID cards, but it was clarified that the transition would be seamless, with no changes to ID numbers or coverage.

**OLD BUSINESS** - None

**NEW BUSINESS** - None

**PUBLIC COMMENT** - None

**MOTION TO ADJOURN THE MEETING:**

**Motion:** Commissioner Cox  
**Second:** Commissioner Wherry  
**Vote:** All in Favor

**MEETING ADJOURNED: 12:59 pm**

**NEXT MEETING: November 10, 2025 11:00AM**

**Zoom**

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Jordyn Robinson, Assisting Secretary

for

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**KIMBERLY DUVA, SECRETARY**