

# CELEBRATING 30 YEARS

"hi" fund at a Glance  
**SUMMER 2022**



New Jersey  
Health Insurance Fund

Schools | Municipalities | Public Entities

# "hi" fund CHAIRPERSONS



## Gateway BMED FUND

Bergen Municipal  
Employee Benefits Fund  
Gregory Hart, Chair



## Central Jersey<sup>FUND</sup>

Central Jersey Regional  
Employee Benefits Fund  
Tom Nolan, Chair



Municipal Reinsurance  
Health Insurance Fund  
Silvio Esposito, Chair



North Jersey Municipal  
Employee Benefits Fund  
Silvio Esposito, Chair



## SCHOOLS HEALTH<sup>FUND</sup> INSURANCE FUND

Schools Health Insurance Fund  
Joseph Collins, Chair



## Southern Coastal<sup>FUND</sup>

Southern Coastal Regional  
Employee Benefits Fund  
Pat Yacovelli, Chair



## Southern Jersey<sup>FUND</sup>

Southern New Jersey Regional  
Employee Benefits Fund  
Michael Mevoli, Chair



## Southern Skylands<sup>FUND</sup>

Southern Skylands Regional  
Health Insurance Fund  
William Hyncik, Chair



## Burlington County INSURANCE COMMISSION

Burlington County  
Insurance Commission  
Ashley Buono, Chair



# WELCOME TO THE “hi” fund

## Celebrating the Past – Looking Toward the Future

It is hard to believe that our New Jersey Health Insurance Fund “hi” family of Funds has been providing high quality, customizable and budget friendly health insurance benefits for public entities for 30 years.

Since the first Funds were created, we have grown to 9 individual Funds and nearly tripled our members. Our Funds now serve 267 public entities – an estimated 21% of NJ market share – that includes municipalities and schools of all sizes across the Garden State.

We currently serve 35,000+ employees and 95,000+ lives, making the “hi” Fund the largest non-state-based benefits pool in New Jersey and one of the largest in the United States.

This year we have already added:

- + 12 New Groups
- + 3,900 New Lives
- + The Schools Health Insurance Fund reached a major milestone this year, as the 103rd school joined the Fund
- + There are 129 total school districts across all Funds

The financial stability of the fund is stronger than ever, and we continue to hold down costs:

- + \$843 Million Collective Annual Budget
- + \$200 Million in Surplus
- + \$303 Million in Dividends
- + 1.66% Average Rate Increase over 5 Years

The “hi” Fund is committed to our members and finding creative ways to improve health and wellness and manage chronic conditions, streamlining the health benefits enrollment and management process, and developing working solutions to deal with insurance changes and challenges in the State.

Celebrating our 30th Anniversary, we invite you to learn about the evolution of our first funds on page 5, and read inspiring stories about how our partnership with Guardian Nurses has positively impacted the lives and health of member families on page 12.

We look forward to the next 30 years and invite you to find out how the “hi” Funds can make a difference to your future bottom line and to the quality of health benefits you can offer to your employees and their families.



Executive Director Joseph DiBella congratulates Diane Peterson, who has been with the Funds since their inception, on her new position as the HIF Business Leader.

“Being involved in the evolution and growth of the HIFs is my passion and has become an integral part of my daily life.”

– Diane Peterson



# MEET THE "hi" fund

New Jersey Health Insurance Fund (hi) is built on the simple and powerful idea of shared services — a pool allowing municipalities, schools, and other public entities to provide choice and value for employees while delivering savings, stability, and reliability for members.

## Advantages

Since the "hi" funds are member owned and governed, they deliver greater customization and control over plans, options and savings.

- + Stable and predictable premium rates over time.
- + Fund Actuary determines the premium rates, not the insurance carriers.
- + Controls insurance company profit and lowers expenses.
- + Streamlines claims management and data reporting.
- + Emphasizes the health and wellness of employees and their family members.
- + Member entities make the rules and design flexible plans.
- + Member entities can duplicate existing plans or customize plans based on specific needs.
- + Broker Friendly - No need to switch or change, we will work directly with your broker.

“Members of a HIF are able to provide custom plan designs to meet the needs of their employees while building longterm budgetary stability.”

*Frank Covelli, Sr. Vice President and Managing Director  
Professional Insurance Associates*



# SUCCESS AT A GLANCE

1.1 Billion in Savings since inception  
when compared to private market.



**\$843M**

collective annual budget

**\$303M**

in dividends (since 1992)

**\$200M**

in surplus

**35,000**

employees



**95,000**

members lives

**5 YEAR AVERAGES**

**1.66%**

rate increase

**30%**

enrollment growth  
rate per year

**267**

public  
entities



**3**

**months**

of claims as surplus



# CELEBRATING 30 YEARS



This year we celebrate 30 years of providing quality and customizable health benefits options to public entities. What started as a proactive move to deal with the insurance crisis has evolved into one of the largest, most stable and reliable non-state-owned health insurance funds (HIF) in New Jersey and across the country.

## History

Prior to 1991, options for municipalities and public entities to obtain health benefits coverage were limited to the State Health Insurance Plan and commercial insurance. In the late 1980s and early 1990s rates began skyrocketing 20% to 30% per year which caused chaos in the marketplace.

The State of New Jersey which had approved the formation of Joint Insurance Funds (JIF) for municipalities several years earlier to help alleviate a liability insurance crisis, finally passed a law in 1991 to allow the creation of Health Insurance Funds (HIF). Both JIFs and HIFs allow public entities to pool or share resources to leverage greater buying power for insurance.

The first HIFs to be established were the Bergen Municipal Employee Benefits Fund (Gateway/BMED), Central NJ Regional Employee Benefit Fund (Central Jersey), the Southern NJ Regional Employee Benefits Fund (Southern Jersey) and the North Jersey Municipal Employee Benefits Fund (NJMEBF).

The HIFs were formed as partnerships between public officials, insurance entrepreneurs, fund administrators, and regionally based claims agents.



"Health insurance funds are the finest example of shared services for the 567 municipalities and 610 school districts in NJ."



## The Beginning

"There was a 26% increase in State health benefit costs and we knew we needed to do something," explained Charles Cuccia, one of the founders and a former chair of the Gateway/BMED Fund, the first to be launched. "A number of Bergen area mayors and small groups were already doing purchasing together, the JIF structure was in place, so creating a HIF to deal with the health insurance issue was a logical way to go."

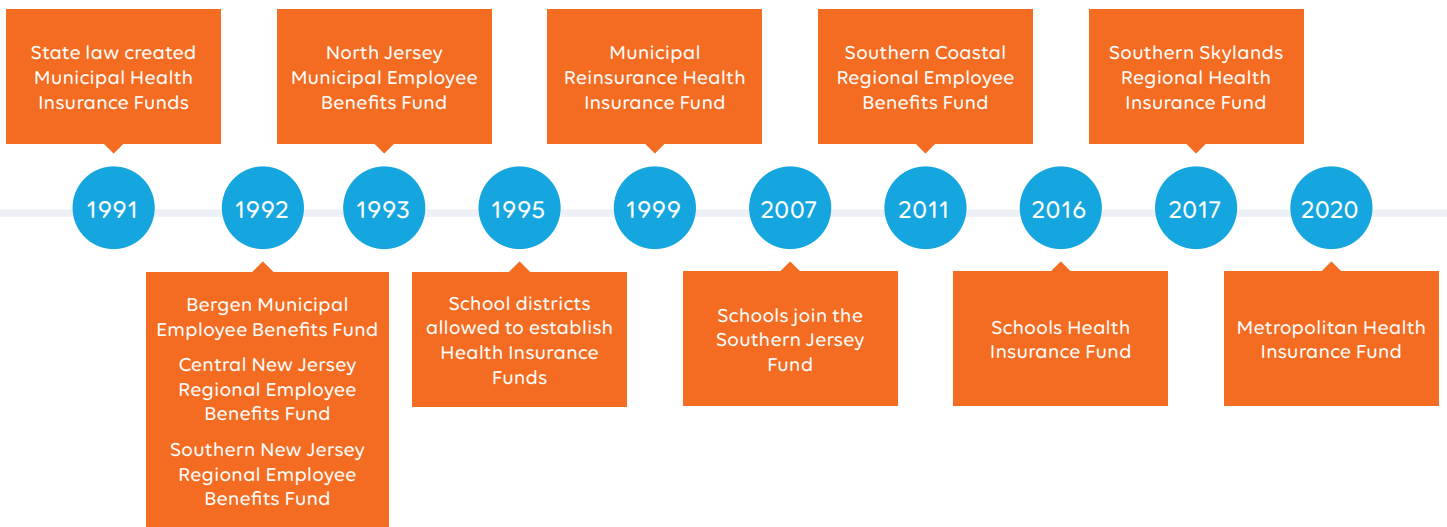
"I remember travelling across the state with a few of my colleagues in my used Cadillac Brougham trying to explain how the HIF would work and trying to convince towns to give it a chance," said Jack Tarditti, a seasoned broker, former mayor and one of the founders of the Southern Jersey Fund. "We wanted to create the HIFs because we wanted to do a better job as elected officials and to find a better way of spending, or in this case saving, taxpayers money."

According to Cuccia members were happy because coverage was good and claims were being paid, but they soon realized that health funds are very different from liability funds.

"At first we were just operating, we didn't know the nuances of controlling how claims were charged and adjudicated or how to negotiate with a hospital over fees," related Cuccia. "So, we changed actuaries and consultants, started doing claims audits and handling a lot of very specific tasks related to health funds. We learn what to do which made it a very strong and efficiently run fund."

Gateway/BMED which now provides health benefits to more than 5,100 lives set the standard and served as the model for the other funds. It has also served as an incubator for many new funds which need to





obtain 1,000 employees before they can become stand-alone funds.

"We had a lot of very small towns in South Jersey, some with only 30 or 40 people," said Mike Mevoli, one of the founders and the current chair of the Southern NJ Fund which incubated under the Gateway/BMED and started with 20 members. "Size matters in the buying power you can have, if you don't have the volume you can't get the discounts and wind up paying top dollar." He added, "There were a lot of moving parts, but once we got the right people in place and got it going the savings were tremendous!"

"The HIFs give us a better product and price points on health, dental and prescription coverage than if we were off by ourselves and not working together. And they give us ownership and a stake in the action." He added, "Today, we are still just as committed to delivering a better product to make sure that our employees get a health benefit plan."

The Southern NJ Fund has grown to over 5,000 members and added large Fire Districts, the Camden County Board of Social Services and MUA's to the list of public entities they serve in three counties.



"Once we got the right people in place and got it going the savings were tremendous!"



### Member Centric Design

The HIFs were created to be regional and hyper-local focused on the needs of their members. They are self-governed and are set up so that every town has a representative that is elected to serve on the HIF commission and gets to vote on fund decisions and operations.

"We have found it is better to have regional funds because it fosters a greater feeling of ownership by the various towns and they are more likely to participate and work together," said Dave Vozza who helped establish several funds including the NJMBEF which has doubled membership since inception and the Municipal Health Reinsurance Fund (MRHIF).

"Our fund is very responsive and tuned into the needs of the individual municipalities," explained Tom Nolan, a founding member and current chair of the Central Jersey Fund. "If you have an issue you can take it right to the top. If they are not able to solve it on the spot they will put the right people on it and get it resolved."

Vozza noted, "The process is very user-friendly. We want to try and ease the stress that is going on in their life, not add to it, so we are committed to finding solutions that help people and make sense."

Flexibility and plan customization also made a huge difference for HIF members who didn't have to settle for the "one-size fits all" approach or be priced out of better-quality services.

"We are able to develop benefits programs that meet the requirements of your contractual agreements," relayed Cuccia.

"The real magic in this is each of our towns is a little different and we have the ability to create an individual plan for town A, B, or C and while they are similar, they are not exactly the same," said Cuccia.

Saving money is important, but the prudent management of these funds has created stability and reliability that goes well beyond a short-term price break, the members are in it for the long haul.

Dividends can be put back into the fund as surplus, distributed directly to members for their use, and can even be used to fund wellness programs

"We can eliminate the profit, overhead and premium taxes normally charged by an insurance company, and because the towns in the fund own the plan any money left over comes directly back to them - not to the insurance company," noted Voza.

"We have retained 80% of our original members over the years," stated Nolan. "This is a tribute to the quality of the fund and the high-level service that we get from our fund professionals at PERMA who have always gone above and beyond - not just for Central, but for all of the funds."

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"We are committed to finding solutions that help people and make sense."

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"We are still going strong after 30 years, we must be doing something right!"

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## Model of Success

These original funds created the building blocks for success. Today, there are eight funds and a ninth in incubation. Members have saved millions of dollars and have the management, administration and structure in place to quickly pivot in a volatile healthcare landscape.

"From 1992 to the present day, the HIF model has provided a stable and predictable solution to help public entities manage health benefit costs – their second largest budget expense," said Diane Peterson who has been involved with the HIFs since inception and serves as Partner and HIF Business Leader at PERMA which functions as the executive director of the Funds. "The NJ HIF model is now one of the most successful insurance pooled arrangements for government entities in the United States."

"The rates have been stable, the surplus is remarkable and we have received dividends almost every year since the 2000s," said Nolan. "With the climate in the industry now, I think that if you are not in a HIF you could see extreme increases to the costs of insurance coverage. We know we can rest easy and are in it for the long haul."

"We have had bumps in the road, but we have the right people in the right positions who are doing things the right way and our members believe in us," stated Mevoli. "We are still going strong after 30 years, we must be doing something right!"

"Health insurance funds are the finest example of shared services for the 567 municipalities and 610 school districts in NJ," added Tarditi.

Joe Buckelew, Chairman at Conner Strong & Buckelew remarked, "Thirty plus years ago a few other benefit brokers and I had a vision to set up these HIF programs. Thanks to the hard work of our professionals, participating public entities and partners, this model we built together has become a successful reality and source of enormous pride."

"Today, the HIFs have attained a collective budget of \$850 million dollars and expanded to provide affordable benefits to nearly 180,000 public workers and their families across NJ," said Buckelew, "And the best is yet to come!"





# SAVINGS & DIVIDENDS

The “hi” funds shared services approach and self-insured structure provides enormous leverage to keep pricing and costs significantly lower than fully-insured programs. The long-term stability and careful management of the funds can lead to a surplus. Since surplus dollars are owned by the members — not the insurance carriers — excess surplus is returned to the members through dividends.

Over the past 5 years the funds have paid

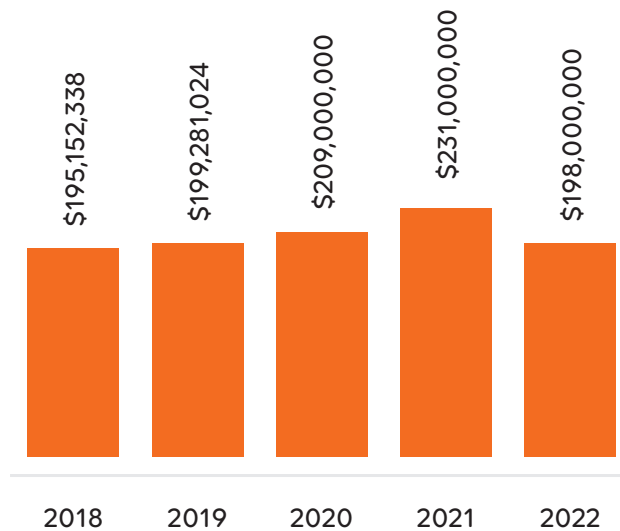
**\$230 MILLION**

in dividends to member entities

Since inception the funds  
have paid more than

**\$303  
MILLION**

in dividends



5 Year Surplus Chart

Financial information and entity count as of 6/30/2022

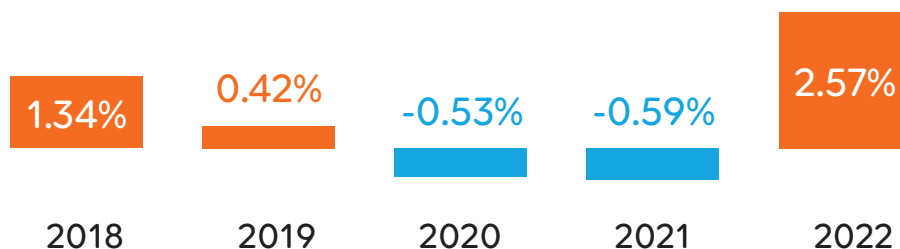
# BUDGET MANAGEMENT

Delivering stable, predictable rates year-over-year is possible because we manage our funds with intense discipline, critically evaluate prospective members, and continue to implement innovative cost controls methods. Using features such as telemedicine, pharmacy utilization protocols, medical case management techniques, and health and wellness grants, we can reduce the amount spent on claims and “flatten” premium variations over time.

On average, budget costs over the past 5 years have only increased on average

1.36%

Combined average increase for all funds from 2018-2022



Financial information and entity count as of 6/30/2022



# BENEFITS

The “hi” fund Best in Class Administrators offer top of the line health plan products and services, and take the burden of tedious paperwork, plan management and reporting off the “to do” lists of our members.



Medical coverage is provided by: Aetna, AmeriHealth, and Horizon OMNIA



Dental coverage is provided by: Delta Dental



Pharmacy coverage is provided by: Express Scripts

**The “hi” fund also includes these “value added” services for our member entities.**



- Through the network of Telemedicine providers offered by AETNA and AmeriHealth, employees and their family members the ability to get medical advice and prescriptions by phone or computer 24/7. This service has a ZERO \$0 copayment and is more convenient and less costly compared to a visit to urgent care or the emergency room. The HIFs also save claim dollars which produces lower premiums. These services are provided by:

- TELADOC (Aetna Members)
- MD LIVE (AmeriHealth Members)

- WEX (formerly benefitexpress) is a web-based, online enrollment service that helps consolidate billing, provides administrator access for enrollment changes, and offers optional self-enrollment for employees.



- COBRA & Retiree Billing Services are standard and included. We handle the notification letters, premium billing and premium collection. In addition, reporting and reconciliations are provided for each member entity and there is a call center for employer and employee inquiries.



**The “hi” fund also offers these health partnerships.**

Everside Health offers members, employees and their families a higher level of access to primary care doctors, offices and medical services at reduced costs. Everside provides a variety of services including enhanced care management, assistance with managing chronic conditions, proactive outreach for testing and follow-up care. (Currently available through the Schools Health Insurance Fund)

Guardian Nurses include a team of experienced registered nurses (RN) who provide personalized care to employees and their family members to better manage their health, make informed decisions and guide them through the complex world of health care. (Currently available through the Schools Health Insurance Fund and Southern Coastal Fund)

**aetna**<sup>SM</sup>

  
**AmeriHealth**<sup>®</sup>

**Horizon**<sup>®</sup>   
**OMNIA**<sup>™</sup>  
HEALTH ALLIANCE

 **EXPRESS SCRIPTS**<sup>®</sup>

 **DELTA DENTAL**<sup>®</sup>

**MDLIVE**<sup>®</sup>

  
**TELADOC**<sup>®</sup>

**everside** HEALTH<sup>™</sup>

  
**GUARDIAN  
NURSES**  
Healthcare Advocates

 **benefitexpress**  
a wex company



# HEALTH SUPPORT THAT CHANGES LIVES

Partnering with health care organizations committed to providing services that improve the health and well-being of our members and their families is a top priority for the “hi” funds.

In 2019 we started our relationship with the Guardian Nurses, first with the Schools Health Insurance Fund and then added this option for the Southern Coastal Health Insurance Fund. To date, they have received more than 7,767 unique referrals to assist patients experiencing acute and chronic health conditions.

Here are just a few of the many patient success stories that illustrate how the Guardian Nurses have changed lives for the better.



## Getting Answers

17-year-old Jessie was a healthy, active high school student until she started having gastrointestinal issues and severe abdominal pain. She was in and out of the hospital several times due to an inability to absorb nutrients from food, but doctors didn't know why. Jessie's mom, Allison, was frustrated and beyond concerned until she returned a call from the Guardian Nurses.

“I was aware of the program, they called after I had surgery last year but didn't need help then. But when this all happened with my daughter I decided to call back,” explained Allison. “I said, ‘I am overwhelmed right now, are you able to help with my daughter,’ and Lauren, the nurse, said, ‘That is what I am here for.’ I felt so relieved.”

Lauren was extremely helpful when Jessie was hospitalized. “I would get mixed messages from the health care professionals, someone would say ‘do this’ and the next person would say the complete opposite. Lauren would get us a straight answer,” explained Allison. “As a mom, I felt good, because while I was trying to care for my child, she was looking out for both of us.”

Lauren has been actively helping to coordinate Jessie's care, relieving some of the burdens from Allison who is trying to work and care for her daughter. She arranges medical appointments, checks on test results, and connected the family to experts to review Jessie's files to get additional opinions. Lauren also works directly with Jessie to answer questions and help manage her illness.

The cause of Jessie's illness is still unknown, but they have made some progress in ruling out certain conditions.

“Lauren has been a dream to work with and this service exceeded our expectations,” said Allison. “I am always advocating for others, I didn't realize how much I needed someone who understood the system to advocate for me, my daughter, and my family.”





### Beating Cancer...Twice

Heather was shocked several years ago when she was diagnosed with cancer – she was in her early 30s. She had surgery in 2016 and thought she was fine until she found a lump on the incision site in 2019 from the previous surgery. It was cancer again.

This triggered the call from Guardian Nurses. “Lauren and I would talk before every doctor visit, she helped me speak with doctors, discussed my procedure, and came up with questions I never would have thought to ask,” said Heather who had surgery in 2020 and then started chemotherapy during the height of COVID-19. “They didn’t allow family members at appointments, but because she is a nurse, Lauren got clearance to come with me. When you are going through something like this you don’t want to be alone and really need support.”

One of the most impactful things that Lauren did was to encourage Heather to get a second opinion. “I was anticipating chemo treatment forever, even though I had no visible cancer. When I switched to Penn, they found a way to give me the security to back off the chemo with more frequent monitoring, so I could finish out my two years of treatment and then stop,” said Heather, who had her last treatment in February and is now cancer free.

“Lauren is more than a nurse, over the past two years she has become a real friend, and I value her guidance and support,” said Heather who is focusing on caring for her two children and living a full, healthy life. “I told her she can’t leave me, even though I am cancer free. It helps to have extra people in your corner that you can count on.”



### Revealing A Hidden Medical Issue

When 24-year-old Emmalee fainted in the middle of the classroom, she became nervous that COVID-19 had affected her body beyond the common head cold symptoms. It had been over a month since she had COVID-19, so she got a series of tests done that might explain her sudden collapse. Doctors could give her no answers.

Fortunately, Emmalee’s father knew of a resource available through his health insurance that might be able to help. Emmalee was paired with Lindsay from Guardian Nurses.

“When I found out I had to get a spinal tap, I was extremely nervous, but Lindsay was by my side through it all. She helped me make appointments, talked me through each procedure, and gave me positive affirmations to keep me grounded,” said Emmalee. “It was extremely

helpful because I was experiencing brain fog for much of that time. I might not have gotten through the experience if it weren’t for Lindsay.”

Emmalee was diagnosed with Postural Orthostatic Tachycardia Syndrome, or POTS, a dysfunction of the autonomic nervous system.

“Lindsay was essential to receiving the diagnosis,” stated Emmalee. “My family didn’t know what steps to take or the proper medical terms to use. I had difficulty getting in touch with doctors on my own. There were days that I felt depressed and defeated, but Lindsay was there to help me take each step.”

Today, Emmalee is more stable and is taking time to recover, but she stays in touch with Lindsay. “She still checks in on me to this day. I can’t say enough good things about her. I would recommend this resource to anyone.”





### Managing Care = Healthier Outcomes

Trying to manage multiple health care issues at the same time can be confusing and overwhelming. That was the case for Jane who was suffering from heart issues, diabetes, rheumatoid arthritis, chronic pain, and depression.

"I had several calls over the years, but I didn't know about the Guardian Nurses service and never called back," said Jane. "Then, I had a heart attack and ended up in the hospital and the nurse called me. I realized these people are nice, not intrusive, and they helped me coordinate everything."

She says the service has been a blessing. "They took care of all of my medical issues. They made doctor appointments, straightened out my medications, and even hooked me up with a counselor to deal with my depression."

The impact has been life-changing for Jane. "I have been dealing with these problems for a long time and never had this much control over my blood sugar and my cholesterol. I have also weaned off my pain medications. I wake up in the morning and I feel normal, I don't feel sick or tired."

The education, monitoring, and care the Guardian Nurses have provided to Jane over the past two years have proven invaluable. "They saved years of my life and have given me the tools to manage better on my own. I feel amazing!"





# FAMILY OF FUNDS

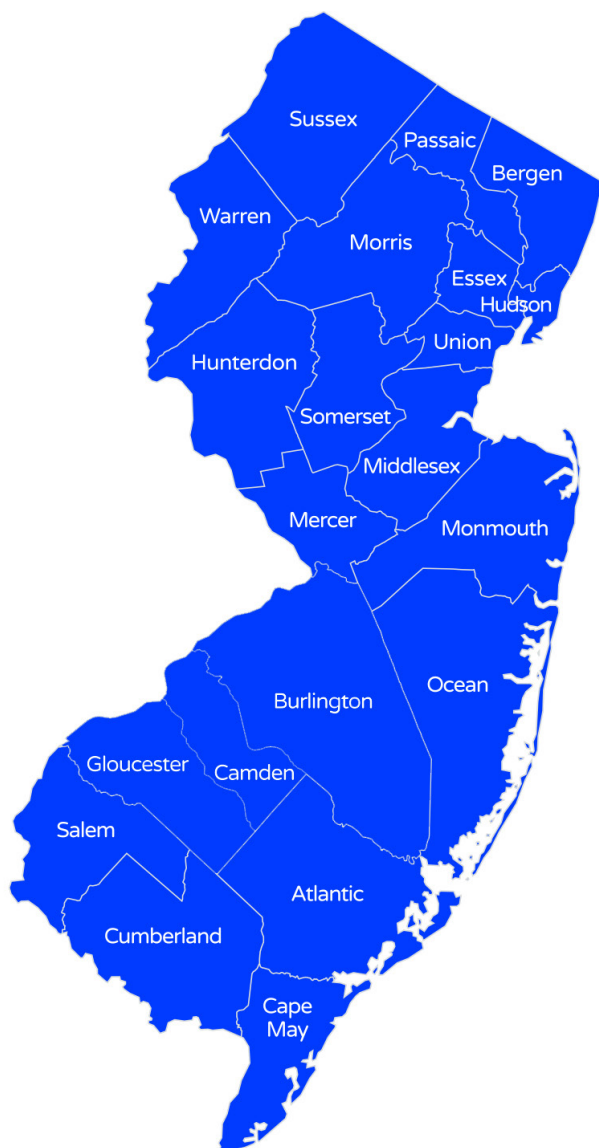






Founded in 1999

- Statewide reinsurance Fund for Health JIFs
- \$16 Million annual budget
- \$10 Million in surplus
- \$40 Million in dividends
- 28,198 employee lives
- 76,135 members lives
- 5 year average rate increase of -6%

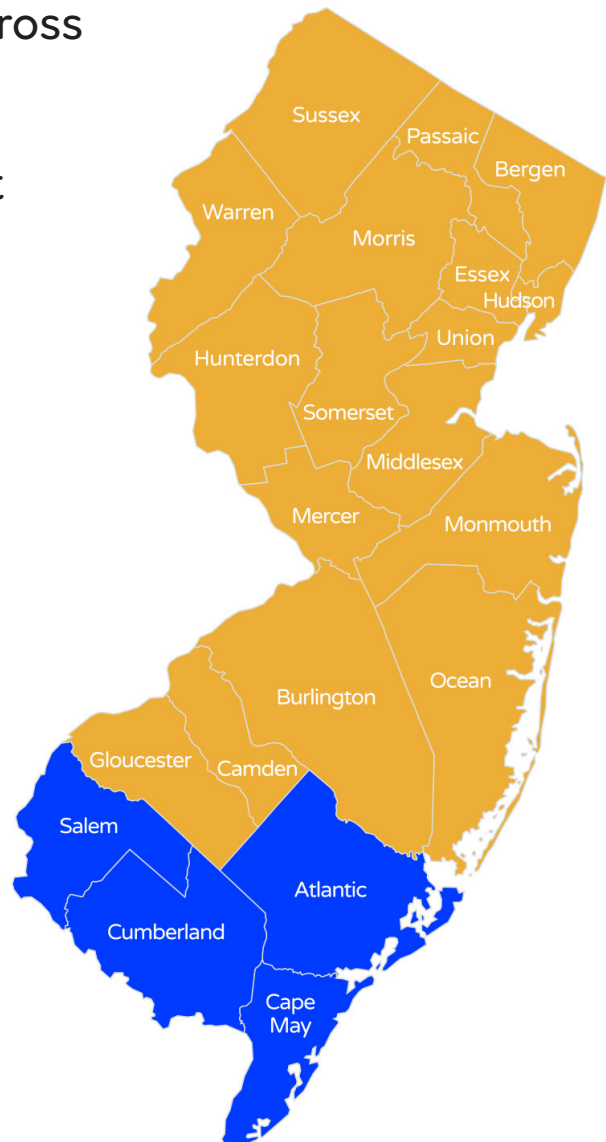


# SCHOOLS HEALTH INSURANCE FUND



Founded in 2016 (spin-off from  
Southern Regional Fund)

- Services school districts across State of NJ
- \$447 Million annual budget
- \$109.5 Million in surplus
- \$40.5 Million in dividends
- 103 entities
- 15,000 employee lives
- 42,000 members lives
- 5 year average rate increase of 2.79%

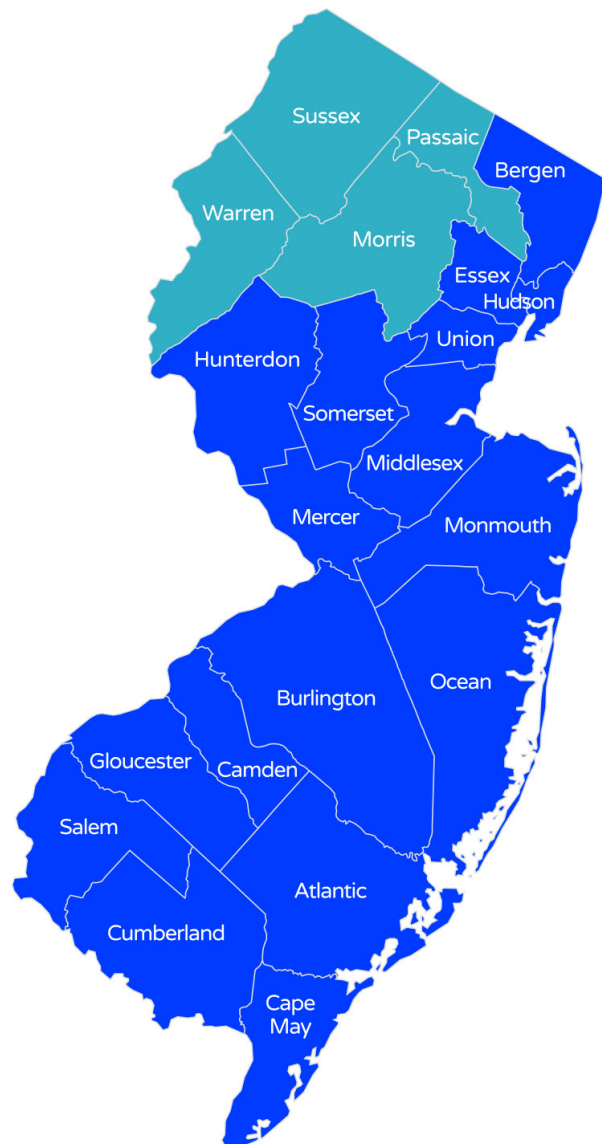






Founded in 1994

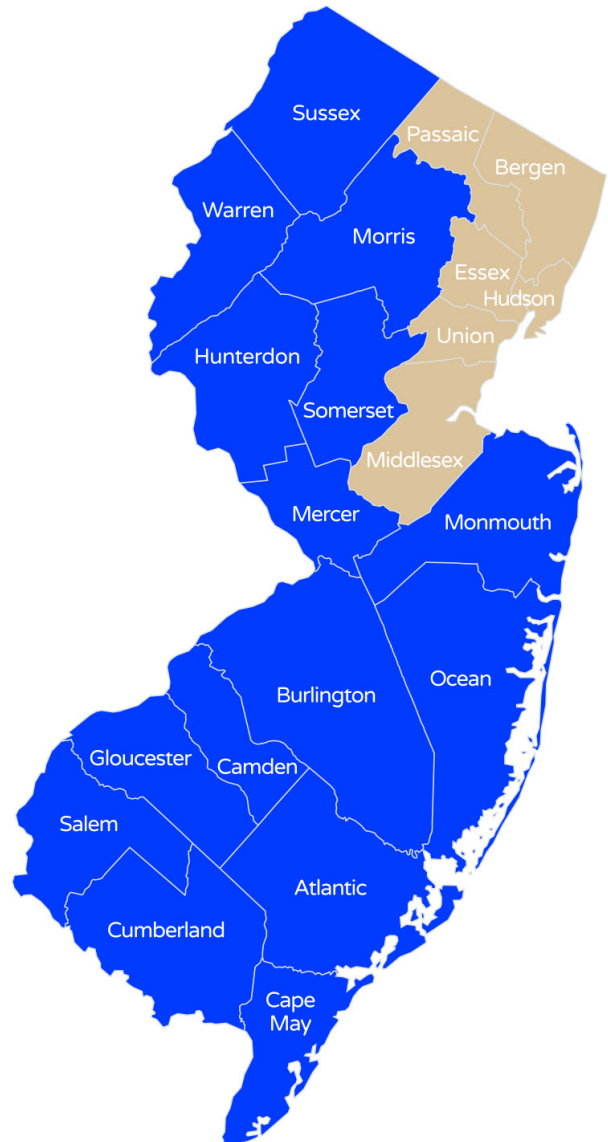
- \$41 Million annual budget
- \$15 Million in surplus
- \$33 Million in dividends
- 28 entities
- 1,495 employee lives
- 4,037 members lives
- 5 year average rate increase of -.05%



# Gateway BMED FUND

Founded in 1992

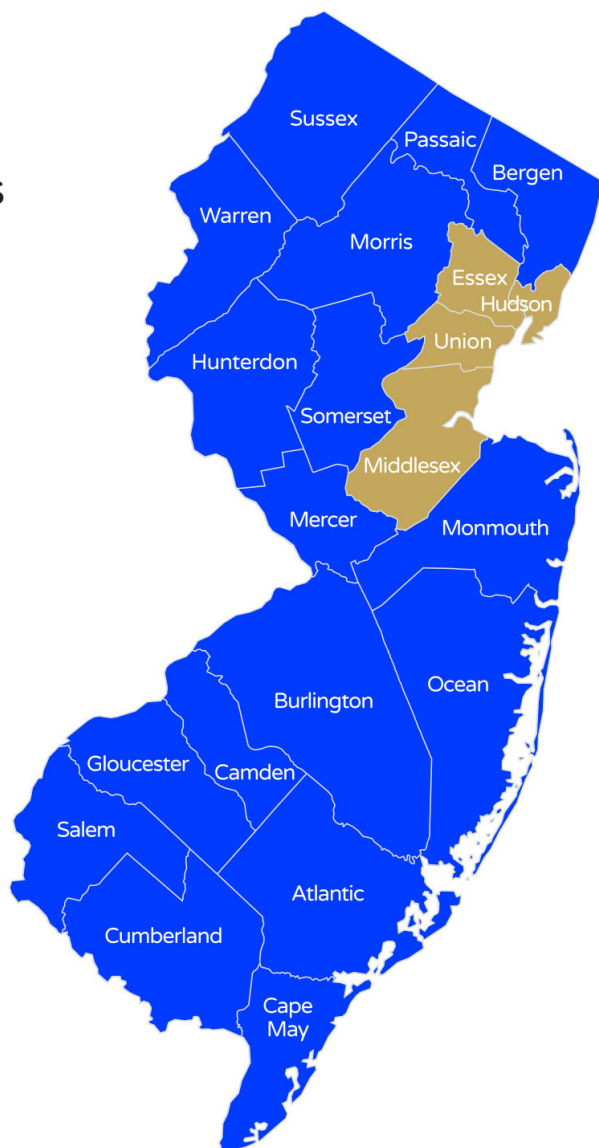
- Services large portions of Northern NJ
- \$36 Million annual budget
- \$13 Million in surplus
- \$22 Million in dividends
- 32 entities
- 3,000 employee lives
- 5,100 members lives
- 5 year average rate increase of .14%





Founded in 2020 (Incubating under Gateway/BMED)

- Services larger public entities and school districts in North Jersey
- \$40 Million annual budget
- \$2.8 Million in surplus
- 9 entities
- 2,800 employee lives
- 4,100 members lives

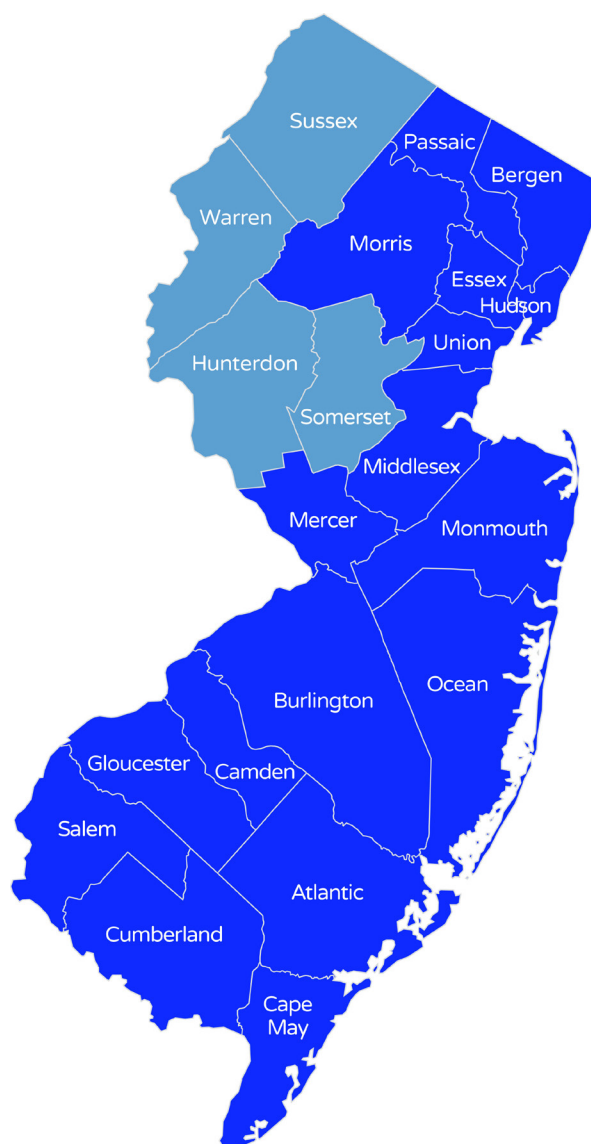




# SouthernSkylands<sup>FUND</sup>

Founded in 2020

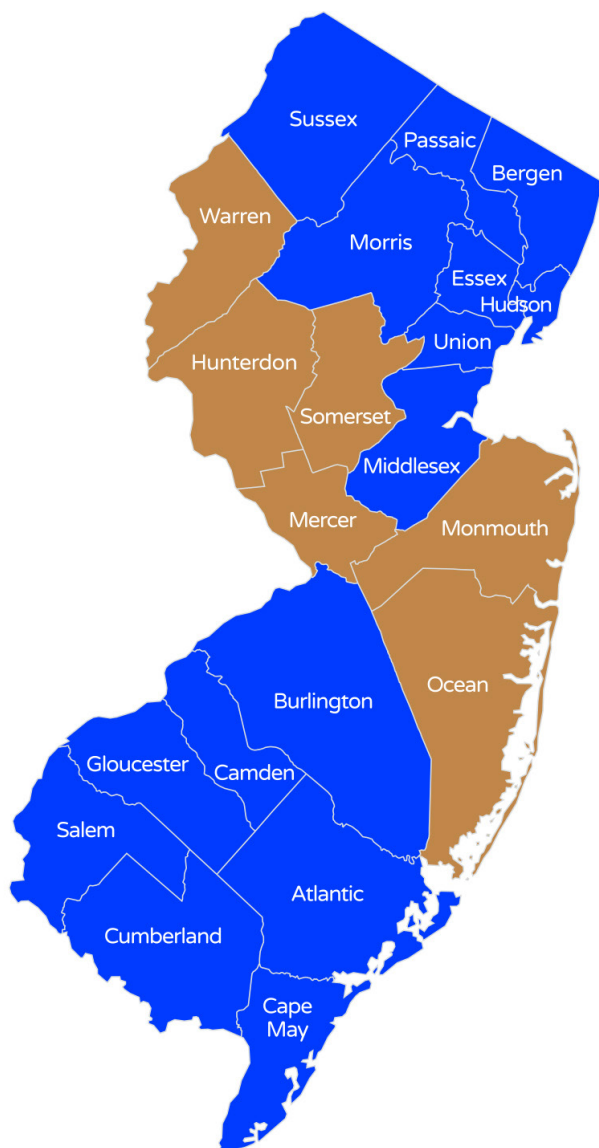
- Primary serving Somerset, Sussex, Hunterdon and Warren Counties
- \$43 Million annual budget
- \$875,000 in surplus
- 4 entities
- 1,780 employee lives
- 4,800 members lives
- 5 year average rate increase 6.5%



# Central<sup>FUND</sup>Jersey

Founded in 1992

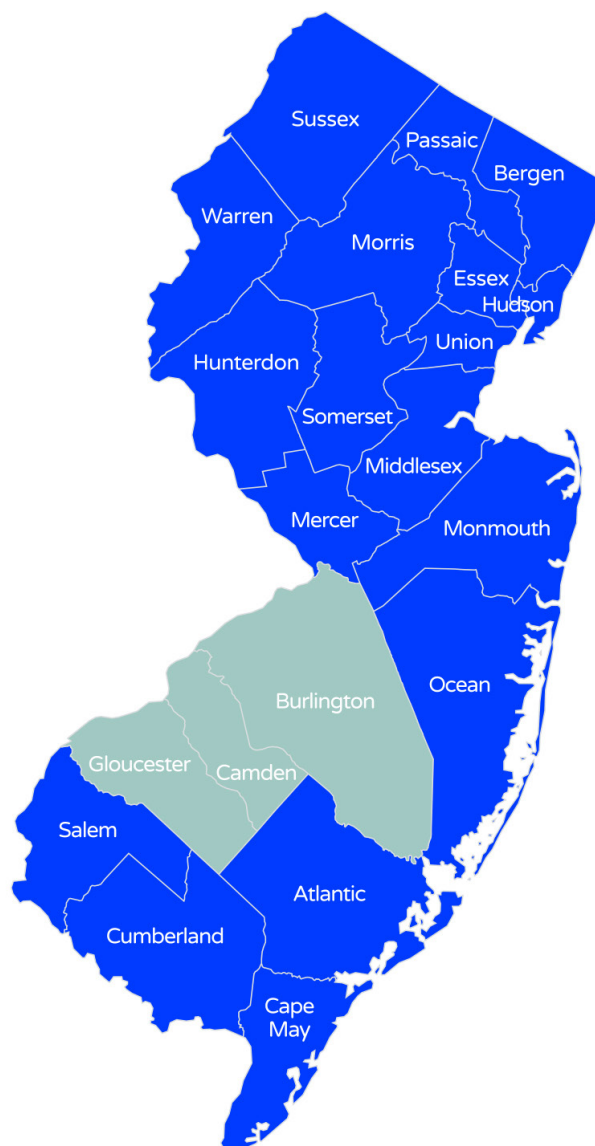
- Services public entities Central and Northwest NJ
- \$44 Million annual budget
- \$15.5 Million in surplus
- \$55 Million in dividends
- 34 entities
- 1,648 employee lives
- 4,450 members lives
- 5 year average rate increase -1.6%



# Southern Jersey FUND

Founded in 1992

- Services municipalities in the Camden, Gloucester and Burlington Counties
- \$43 Million annual budget
- \$7.3 Million in surplus
- \$72 Million in dividends
- 37 entities
- 1,700 employee lives
- 4,500 member lives
- 5 year average rate increase of -1.73%

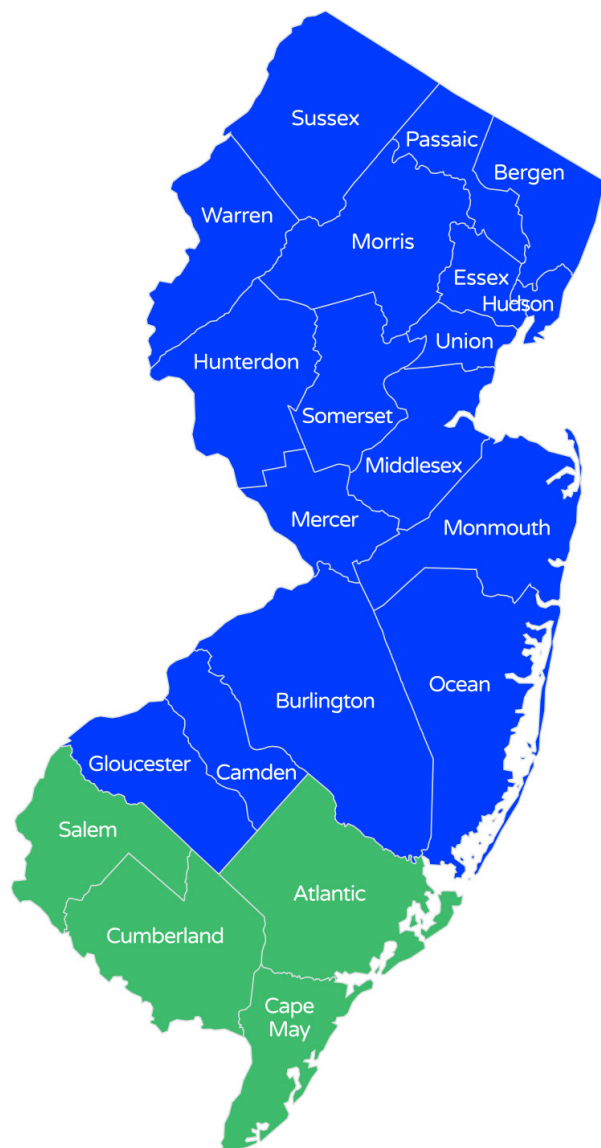




# SouthernCoastal<sup>FUND</sup>

Founded in 2011 (spin-off from Southern Regional Fund)

- Services public entities in Salem, Cumberland, Atlantic and Cape May Counties
- \$111 Million annual budget
- \$12 Million in surplus
- \$16 Million in dividends
- 25 entities
- 5,000 employee lives
- 13,400 members lives
- 5 year average rate increase of 1.14%





# WHAT YOU NEED TO KNOW

## How do the “hi” funds operate?

The “hi” funds (HIFs) are public entities and are governed in the same fashion as Joint Insurance Funds (JIFs) are for property and casualty coverage. What makes these funds so effective is the high level of stakeholder involvement.

Each member entity has a seat at the table and selects one person to serve as their Fund Commissioner. The Commissioner becomes the voice of their school, municipality, or public entity, and serves on the governing body of the fund.

At the annual reorganization meeting, the Commissioners elect an Executive Committee to manage the monthly meetings and to make decisions that are in the best interest of the member entities within that specific HIF.

On a rotating basis, the “hi” funds perform a Request for Qualification process for all fund professionals that serve the funds.

- + Executive Director
- + Attorney
- + Program Manager
- + Auditor
- + Actuary
- + Treasurer

## Broker/Consultant Role

Employee Benefits brokers and consultants are vetted by the “hi” funds and are an integral component of the overall success of the “hi” funds.

## Powered by PERMA

PERMA serves as Executive Director for the “hi” funds. PERMA is responsible for preparing meeting agendas, minutes and records management. PERMA serves as the “back office,” with many other responsibilities including: accounting and general ledger functions, enrollment and COBRA administration, regulatory interface, and annual filings.

Powered by **PERMA** | RISK  
MANAGEMENT  
SERVICES

# "hi" fund TEAM



"The health benefits field is becoming increasingly complex and it's becoming ever more important to leverage the various experience of Fund professionals. The Fund is inherently collaborative and professionals stay ahead of industry trends to recommend practices, policies and procedures that are necessary for solvency. Educational resources and expertise assist in making participants better consumers. Step by step, the Fund has managed to stay ahead of the curve without sacrificing quality and benefits that participants have come to expect."



Brian J. Brach, PE, QPA, Executive Director  
Manasquan River Regional Sewerage Authority – Central Jersey HIF

# Dive into New Jersey's Safest Health Insurance Pool



[hifundnj.com](http://hifundnj.com) | [info@hifundnj.com](mailto:info@hifundnj.com)