

**CENTRAL JERSEY HEALTH INSURANCE FUND  
BILLS LIST**

**Confirmation of Payment**

**AUGUST 2014**

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

**BE IT RESOLVED** that the Central Jersey 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 2013**

<u>CheckNumber</u>	<u>VendorName</u>	<u>Comment</u>	<u>InvoiceAmount</u>
<b>000330</b>			
000330	QUALCARE, INC.	RECONCILIATION - 8/22/14 - (DEC 2013)	25,864.63
			<b>25,864.63</b>
		Total Payments FY 2013	25,864.63

**FUND YEAR 2014**

<u>CheckNumber</u>	<u>VendorName</u>	<u>Comment</u>	<u>InvoiceAmount</u>
<b>000331</b>			
000331	AETNA - MEDICARE ADVANTAGE	MEDICARE ADVANTAGE - 08/2014	62,016.00
			<b>62,016.00</b>
<b>000332</b>			
000332	EXPRESS SCRIPTS, INC.	CLINICAL PROGRAM - 7/14 - CJHA GRP YNL	204.80
000332	EXPRESS SCRIPTS, INC.	CLINICAL PROGRAM - 7/14 - CJHA GRP YNJ	1,824.44
000332	EXPRESS SCRIPTS, INC.	ADMIN - 7/12 THR 7/21 - CJHA GRP 831	41.08
000332	EXPRESS SCRIPTS, INC.	CLINICAL PROGRAM - 3/14 - CJHA GRP YNJ	1,829.81
000332	EXPRESS SCRIPTS, INC.	CLINICAL PROGRAM - 3/14 - CJHA GRP YNL	211.51
			<b>4,111.64</b>
<b>000333</b>			
000333	QUALCARE, INC.	TPA FEE 08/2014	23,021.40
			<b>23,021.40</b>
<b>000334</b>			
000334	AETNA	TPA FEE 08/2014	39,082.75
			<b>39,082.75</b>
<b>000335</b>			
000335	DELTA DENTAL OF NEW JERSEY INC	DENTAL ADMIN - 08/2014	4,315.75
			<b>4,315.75</b>
<b>000336</b>			
000336	PERMA	ADMIN-MEDICARE PART D - 08/2014	693.21
000336	PERMA	INTERNAL DOCUMENTATION - 08/2014	208.33
000336	PERMA	POSTAGE FEE 07/2014	24.54
000336	PERMA	COBRA ADMIN - 08/2014	1,382.34
000336	PERMA	EXECUTIVE DIRECTOR - 08/2014	15,293.72
000336	PERMA	GASB 45 ADMIN - 08/2014	867.00
			<b>18,469.14</b>
<b>000337</b>			
000337	BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEE 08/2014	2,861.00
			<b>2,861.00</b>
<b>000338</b>			
000338	HOLMAN, FRENIA, ALLISON, P.C.	AUDITOR FEE 07/31/2014	1,813.00
			<b>1,813.00</b>

<b>000339</b>			
000339	STEPHEN MAYER	TREASURER FEE 08/2014	925.00
			<b>925.00</b>
<b>000340</b>			
000340	ASBURY PARK PRESS	ACCT ASB-187377 - 8/16/14 - LEGAL NOTICE	83.75
000340	ASBURY PARK PRESS	ACCT NO. 128965 - 7/2/14 - SYNOPSIS	152.00
			<b>235.75</b>
<b>000341</b>			
000341	ALLSTATE INFORMATION MANAGEMNT	DEPT: 420 - ACT & STOR 7/31/2014	40.18
			<b>40.18</b>
<b>000342</b>			
000342	IMEDECS, INC.	PROFESSIONAL SERVICES - 08/04/14	425.00
			<b>425.00</b>
<b>000343</b>			
000343	CONNER STRONG & BUCKELEW	PROGRAM MANAGER FEE 08/2014	34,923.15
000343	CONNER STRONG & BUCKELEW	PLAN DOCUMENT - 08/2014	1,250.00
000343	CONNER STRONG & BUCKELEW	DENTAL COMMISSION - 08/2014	153.73
000343	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM - 08/2014	1,076.66
000343	CONNER STRONG & BUCKELEW	NEW MEMBER COMMISSION - 08/2014	4,275.74
			<b>41,679.28</b>
<b>000344</b>			
000344	MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE - 08/2014	136,289.40
000344	MUNICIPAL REINSURANCE H.I.F.	AGGREGATE REINSURANCE - 08/2014	8,015.50
			<b>144,304.90</b>
		Total Payments FY 2014	343,300.79

**TOTAL PAYMENTS ALL FUND YEARS \$ 369,165.42**

\_\_\_\_\_  
Chairperson

Attest:

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

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

\_\_\_\_\_  
Treasurer

**CENTRAL JERSEY HEALTH INSURANCE FUND  
BILLS LIST**

**Resolution No. 18-14**

**SEPTEMBER 2014**

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

**BE IT RESOLVED** that the Central Jersey 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 CLOSED**

<u>CheckNumber</u>	<u>VendorName</u>	<u>Comment</u>	<u>InvoiceAmount</u>
<b>000345</b>			
000345	STATE OF NJ HEALTH BENEFITS FU	STATE SURCHARGE OF BOE'S - 7/12-06/13	5,766.00
			<b>5,766.00</b>
		Total Payments Closed Year	<b>5,766.00</b>

**FUND YEAR 2013**

<u>CheckNumber</u>	<u>VendorName</u>	<u>Comment</u>	<u>InvoiceAmount</u>
<b>000346</b>			
000346	STATE OF NJ HEALTH BENEFITS FU	STATE SURCHARGE OF BOE'S - 7/12-06/13	1,292.00
			<b>1,292.00</b>
		Total Payments FY 2013	<b>1,292.00</b>

**FUND YEAR 2014**

<u>CheckNumber</u>	<u>VendorName</u>	<u>Comment</u>	<u>InvoiceAmount</u>
<b>000347</b>			
000347	AETNA - MEDICARE ADVANTAGE	MEDICARE ADVANTAGE - 09/2014	62,288.00
			<b>62,288.00</b>
<b>000348</b>			
000348	QUALCARE, INC.	TPA FEE 09/2014	19,140.45
			<b>19,140.45</b>
<b>000349</b>			
000349	AETNA	TPA FEE 09/2014	39,471.15
			<b>39,471.15</b>
<b>000350</b>			
000350	DELTA DENTAL OF NEW JERSEY INC	DENTAL ADMIN - 09/2014 - GRP 3601	4,331.00
			<b>4,331.00</b>
<b>000351</b>			
000351	PERMA	ADMIN-MEDICARE PART D - 09/2014	693.21
000351	PERMA	INTERNET DOCUMENTATION - 09/2014	208.33
000351	PERMA	POSTAGE FEE 08/2014	62.38
000351	PERMA	COBRA ADMIN - 09/2014	1,361.19
000351	PERMA	EXECUTIVE DIRECTOR FEE 09/2014	15,104.69
000351	PERMA	GASB 45 AUDITS - 09/2014	867.00
			<b>18,296.80</b>
<b>000352</b>			
000352	BERRY,SAHRADNIK,KOTZAS& BENSON	ATTORNEY FEE 09/2014	2,861.00
			<b>2,861.00</b>
<b>000353</b>			
000353	HOLMAN, FRENIA, ALLISON, P.C.	AUDITOR FEE 08/2014	1,813.00
			<b>1,813.00</b>

<b>000354</b>			
000354	STEPHEN MAYER	TREASURER FEE 09/2014	925.00
			<b>925.00</b>
<b>000355</b>			
000355	ALLSTATE INFORMATION MANAGEMNT	DEPT: 420 - ACT & STOR 08/31/2014	40.18
			<b>40.18</b>
<b>000356</b>			
000356	CONNER STRONG & BUCKELEW	PROGRAM MANAGER FEE 09/2014	34,454.98
000356	CONNER STRONG & BUCKELEW	PLAN DOCUMENTS - 09/2014	1,250.00
000356	CONNER STRONG & BUCKELEW	DENTAL COMMISSION - 09/2014	153.73
000356	CONNER STRONG & BUCKELEW	HEALTH CARE REFORM - 09/2014	1,054.52
000356	CONNER STRONG & BUCKELEW	NEW MEMEBER COMMISSION - 09/2014	4,203.92
			<b>41,117.15</b>
<b>000357</b>			
000357	MUNICIPAL REINSURANCE H.I.F.	SPECIFIC REINSURANCE - 09/2014	133,486.80
000357	MUNICIPAL REINSURANCE H.I.F.	AGGREGATE REINSURANCE - 09/2014	7,917.75
			<b>141,404.55</b>
	Total Payments FY	Total Payments FY 2014	<b>331,688.28</b>

**TOTAL PAYMENTS ALL FUND YEARS \$ 338,746.28**

\_\_\_\_\_  
Chairperson

Attest:

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

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

\_\_\_\_\_  
Treasurer