

**CUMBERLAND COUNTY INSURANCE COMMISSION
AGENDA AND REPORTS
FEBRUARY 2, 2017 – 11 AM**

**COUNTY ADMINISTRATION BUILDING
164 WEST BROAD STREET
BRIDGETON, NJ 08302**

**To attend the meeting via teleconference please dial 1-866-921-5493
and enter passcode 7269691#**

OPEN PUBLIC MEETINGS ACT - STATEMENT OF COMPLIANCE

In accordance with the Open Public Meetings Act, notice of this meeting was given by:

- I. Advertising the notice in the Daily Journal and South Jersey Times**
- II. Filing advance written notice of this meeting with the Commissioners of the Cumberland County Insurance Commission; and**
- III. Posting notice on the Public Bulletin Board of the Office of the County Clerk**
- IV. The meeting is called to order and it is noted that adequate notice was provided in accordance with Chapter 231, Public Law 1975 (Senator Byron M. Bear Open Public Meetings Act)**

**CUMBERLAND COUNTY INSURANCE COMMISSION
AGENDA -OPEN PUBLIC MEETING
FEBRUARY 2, 2017 – 11:00 AM**

- MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ**
- FLAG SALUTE**
- ROLL CALL OF COMMISSIONERS**
- APPROVAL OF MINUTES: December 1, 2016 Open Minutes.....Appendix I
December 1, 2016 Closed Minutes.....To be Distributed
December 20, 2016 Open Minutes.....Appendix I
December 20, 2016 Closed Minutes.....To be Distributed**

- CORRESPONDENCE - None**

- EXECUTIVE DIRECTOR/ADMINISTRATOR – PERMA.....Page 1**

- COMMITTEE REPORTS**
 - Safety Committee Report.....Verbal
 - Claims Committee Report.....Verbal
 - Claims Committee Meeting Schedule.....Page 64
 - Claims Committee Charter Amendment.....Page 65

- TREASURER – Anthony Bontempo**
 - Resolution 13-17** January Bill List.....Page 69

- CEL SAFETY DIRECTOR – J.A. Montgomery Risk Control**
 - Monthly ReportPage 71

- RISK MANAGER REPORT – Hardenbergh Insurance Group**
 - Monthly ReportPage 77

- CLAIMS SERVICE – Inservco Insurance Services**
 - Liability Claim Payments – 11/1/16 to 12/31/16.....Page 83
 - Resolution 14-17** Authorizing Disclosure of Claims Check Register..... Page 85
 - Stewardship Report.....Appendix II

- MANAGED CARE – Qual Lynx**
 - Monthly ReportPage 87

EXECUTIVE SESSION

Motion for Executive Session for Certain Specified Purposes for Personnel, Safety, Public Property or Litigation in accordance with the Open Public Meeting Act - PAYMENT AUTHORIZATION REQUEST

Motion to Return to Open Session

Motion to Approve PARS

OLD BUSINESS

NEW BUSINESS

PUBLIC COMMENT

MEETING ADJOURNMENT

NEXT SCHEDULED MEETING: APRIL 6, 2017, 11 AM

CUMBERLAND COUNTY INSURANCE COMMISSION

9 Campus Drive, Suite 216
Parsippany, NJ 07054

Date: February 2, 2017
Memo to: Commissioners of the Cumberland County Insurance Commission
From: PERMA Risk Management Services
Subject: Executive Director's Report

Election of Chairperson & Vice Chairperson – Executive Director asks for nominations and conducts election.

Reorganizational Resolutions (Pages 3-56) – Listed below are the necessary Reorganizational Resolutions for the Cumberland County Insurance Commission.

- Resolution 1-17 Certifying the Election of Chairperson and Vice Chairperson
- Resolution 2-17 Appointing CEL Commissioner
- Resolution 3-17 Appointing Commission Treasurer
- Resolution 4-17 Appointing Commission Attorney
- Resolution 5-17 Appointing Commission Secretary
- Resolution 6-17 Designating Authorized Depositories for Commission Assets and Establishing a Cash Management Plan
- Resolution 7-17 Designating Authorized Signatures for Commission Bank Accounts
- Resolution 8-17 Appointing Agent for Service of Process and Designating Custodian of Commission Records
- Resolution 9-17 Designating Official Newspapers
- Resolution 10-17 Establish Public Meeting Procedures
- Resolution 11-17 2017 Risk Management Plan

Motion to approve Resolutions 1-17 through 11-17

2017 Property & Casualty Budget – The 2017 Property & Casualty Budget was introduced at the December 1, 2016 meeting. In accordance with State regulations, the budget has been advertised in the Commission's official newspaper and posted at the Clerk's office. The Public Hearing for the budget will be held at this meeting. A copy of the proposed 2017 budget appears on **Page 57**, assessments by member entity are on **Page 58**.

Motion to open the Public Hearing on the 2017 Budget.

Discussion of Budget.

Motion to close the Public Hearing.

- ❑ **Motion to approving Resolution 12-17 (Page 59) adopting the Budget for the Cumberland County Insurance Commission in the amount of \$2,893,351 as presented for the Commission Year 2017 and Certify the Assessments.**

- ❑ **2017 Property & Casualty Assessments** – In accordance with the Commission’s By Laws, the assessment bills for 2017 for property and casualty will be mailed to member entities now that the budget has been adopted. Assessments will be due as follows: The first payment of 40% will be due on March 15, 2017. The second assessment of 30% is due on June 15, 2017 and the third assessment of 30% is due on September 15, 2017.

- ❑ **NJ Excess Counties Insurance Fund (CELJIF)** – The CEL held a special meeting on January 25th to process claim payments. The next regular meeting will be on February 23, 2017 at the Camden County Emergency Center. This will serve as the Funds Re-organizational meeting.

- ❑ **Financial Fast Track** – Included on **Page 60 & 61** of the agenda are the Financial Fast Tracks for the Cumberland County Insurance Commission for October and November. As of **November 30, 2016** the Commission has a statutory surplus of **\$1,410,623**.

- ❑ **NJ CEL Property and Casualty Financial Fast Track (Page 62)** – Included in the agenda is the NJ CEL Financial Fast Track Reports for November. As of November 30, 2016 the CEL has a surplus of **\$7,793,256**.

- ❑ **Certificate of Insurance Issuance Report: Certificate of Insurance Issuance Report:** Attached on **Pages 63** is the Certificate of Insurance Issuance Report from the CEL listing those certificates issued for the period of November 22, 2016 to December 31, 2016. There were 2 certificates of insurance issued during this period.
 - ❑ **Motion to approve the certificate of insurance report.**

RESOLUTION NO. 1 -17

CUMBERLAND COUNTY INSURANCE COMMISSION

**CERTIFYING THE ELECTION OF
CHAIRPERSON AND VICE CHAIRPERSON**

WHEREAS, the CUMBERLAND COUNTY INSURANCE COMMISSION (hereinafter “CCIC”) is duly constituted as an Insurance Commission pursuant to N.J.S.A. 40A:10-6 et seq.; and

BE IT RESOLVED by the CUMBERLAND COUNTY INSURANCE COMMISSION that the following persons have been elected as Chairperson and Vice-Chairperson:

_____ Chairman

_____ Vice Chairman

BE IT FURTHER RESOLVED, that the Chairman and Vice Chairman shall serve through 2018 CCIC Reorganization.

ADOPTED by THE CUMBERLAND COUNTY INSURANCE COMMISSION at a properly noticed meeting held on February 2, 2017.

ADOPTED:

BY: _____
CHAIRMAN

ATTEST:

VICE CHAIRMAN

RESOLUTION NO. 2 -17

**CUMBERLAND COUNTY INSURANCE COMMISSION APPOINTING A
COMMISSIONER TO THE NEW JERSEY COUNTIES EXCESS JOINT INSURANCE
FUND FOR FUND YEAR 2017**

WHEREAS, the CUMBERLAND COUNTY INSURANCE COMMISSION (hereinafter “CCIC”) is duly constituted as an Insurance Commission pursuant to N.J.S.A. 40A:10-6 et seq.; and

WHEREAS, the New Jersey Counties Excess Joint Insurance Fund (hereinafter the Fund) is duly constituted as a joint insurance fund; and

WHEREAS, the Fund by-laws require each member insurance commission to appoint one (1) commissioner to the Fund; and

WHEREAS, **Ken Mecouch** is a member of the Commission and the Commission having deemed it appropriate to designate **Ken Mecouch** as commissioner to the Fund; and

NOW THEREFORE BE IT RESOLVED by the Commissioners of said Commission that **Ken Mecouch** is designated Commissioner to the New Jersey Counties Excess Joint Insurance Fund until the New Jersey Counties Excess Joint Insurance Fund 2018 Reorganization.

ADOPTED by THE CUMBERLAND COUNTY INSURANCE COMMISSION at a properly noticed meeting held on February 2, 2017.

ADOPTED:

BY: _____
CHAIRMAN

ATTEST:

VICE CHAIRMAN

RESOLUTION NO. 3 -17

**CUMBERLAND COUNTY INSURANCE COMMISSION
DESIGNATING COMMISSION TREASURER**

WHEREAS, the CUMBERLAND COUNTY INSURANCE COMMISSION (hereinafter “CCIC”) is duly constituted as an Insurance Commission pursuant to N.J.S.A. 40A:10-6 et seq.; and

WHEREAS, the CCIC requires the services of a Treasurer, and

WHEREAS, **Anthony Bontempo** has demonstrated the skill and possesses the qualifications to perform the duties of Treasurer for the County Insurance Commission;

WHEREAS, the Commission authorizes the appointment of **Anthony Bontempo** as CCIC Treasurer for the term commencing upon adoption of the within resolution through 2018 CCIC Reorganization;

ADOPTED by the CUMBERLAND COUNTY INSURANCE COMMISSION at a properly noticed meeting held on February 2, 2017.

ADOPTED:

BY: _____
CHAIRMAN

ATTEST:

VICE CHAIRMAN

RESOLUTION NO. 4 -17

**CUMBERLAND COUNTY INSURANCE COMMISSION
DESIGNATING COMMISSION ATTORNEY**

WHEREAS, the CUMBERLAND COUNTY INSURANCE COMMISSION (hereinafter “CCIC”) is duly constituted as an Insurance Commission pursuant to N.J.S.A. 40A:10-6 et seq.; and

WHEREAS, the CCIC requires the services of an Attorney, and

WHEREAS, **Theodore Baker** has demonstrated the skill and possesses the qualifications to perform the duties of Commission Attorney for the County Insurance Commission;

WHEREAS, the Commission authorizes the appointment of **Theodore Baker** as CCIC Attorney for the term commencing upon adoption of the within resolution through 2018 CCIC Reorganization; and

BE IT FURTHER RESOLVED that **Theodore Baker** shall receive no compensation to serve as Commission Attorney to the CCIC.

ADOPTED by the CUMBERLAND COUNTY INSURANCE COMMISSION at a properly noticed meeting held on February 2, 2017.

ADOPTED:

BY: _____
CHAIRMAN

ATTEST:

VICE CHAIRMAN

RESOLUTION NO. 5 -17

**CUMBERLAND COUNTY INSURANCE COMMISSION
DESIGNATING COMMISSION SECRETARY**

WHEREAS, the CUMBERLAND COUNTY INSURANCE COMMISSION (hereinafter “CCIC”) is duly constituted as an Insurance Commission pursuant to N.J.S.A. 40A:10-6 et seq.; and

WHEREAS, the CCIC requires the services of an Secretary, and

WHEREAS, **Beth Kostok** has demonstrated the skill and possesses the qualifications to perform the duties of Commission Secretary for the County Insurance Commission;

WHEREAS, the Commission authorizes the appointment of **Beth Kostok** as CCIC Secretary for the term commencing upon adoption of the within resolution through 2018 CCIC Reorganization; and

ADOPTED by the CUMBERLAND COUNTY INSURANCE COMMISSION at a properly noticed meeting held on February 2, 2017.

ADOPTED:

BY: _____
CHAIRMAN

ATTEST:

VICE CHAIRMAN

RESOLUTION NO. 6 -17

**CUMBERLAND COUNTY INSURANCE COMMISSION
DESIGNATING AUTHORIZED DEPOSITORIES FOR FUND ASSETS
AND ESTABLISHING A CASH MANAGEMENT PLAN**

WHEREAS, the CUMBERLAND COUNTY INSURANCE COMMISSION (hereinafter "CCIC") is duly constituted as an Insurance Commission pursuant to N.J.S.A. 40A:10-6 et seq.; and

BE IT RESOLVED that OceanFirst Bank is hereby designated as the depository for assets of the Fund.

BE IT FURTHER RESOLVED that the attached Cash and Investment Management Plan, which includes the designation of authorized depositories, be and is hereby adopted.

ADOPTED by the CUMBERLAND COUNTY INSURANCE COMMISSION at a properly noticed meeting held on February 2, 2017.

ADOPTED:

BY: _____
CHAIRMAN

ATTEST:

VICE-CHAIRMAN

CUMBERLAND COUNTY INSURANCE COMMISSION

2017 CASH MANAGEMENT AND INVESTMENT POLICY

1) Cash Management and Investment Objectives

The CUMBERLAND COUNTY INSURANCE COMMISSION's (hereinafter referred to as the Commission) objectives in this area are:

- a.) Preservation of capital.
- b.) Adequate safekeeping of assets.
- c.) Maintenance of liquidity to meet operating needs, claims settlements and dividends.
- d.) Diversification of the Commission's portfolio to minimize risks associated with individual investments.
- e.) Maximization of total return, consistent with risk levels specified herein.
- f.) Investment of assets in accordance with State and Federal Laws and Regulations.
- g.) Accurate and timely reporting of interest earnings, gains and losses by line of coverage in each Commission year.
- h.) Where legally permissible, cooperation with other local municipal joint insurance funds/commissions, and the New Jersey Division of Investment in the planning and execution of investments in order to achieve economies of scale.
- i.) Stability in the value of the Commission's economic surplus.

2.) Permissible Investments

Investments shall be limited to the following:

- a.) Bonds or other obligations of the United States of America or obligations guaranteed by the United States of America.
- b.) Any federal agency or instrumentality obligation authorized by Congress that matures within 397 days from the date of purchase, and has a fixed rate of interest not dependent on any index or external factors.
- c.) Bonds or other obligations of the local unit or bonds or other obligations of school districts of which the local unit is a part or within which the school district is located; or
- d.) Bonds or other obligations, having a maturity date not exceeding 397 days, approved by the Division of Investment of the Department of Treasury for investment by local units.
- e.) Debt obligations of federal agencies or government corporations with maturities not greater than five (5) years from the date of purchase, excluding mortgage backed obligations, providing that such investments are purchased through the New Jersey Division of Investment and are consistent the

- Division's own investment guidelines, and providing that the investment a fixed rate of interest not dependent on any index or external factors.
- f.) Repurchase agreements of fully collateralized securities, subject to rules and conditions establish by the N.J. Department of Community Affairs.
 - g.) Government money market mutual funds.
 - h.) Local Government Investment Pools

No investment or deposit shall have a maturity longer than five (5) years from date of purchase.

3.) **Authorized Depositories**

In addition to the above, the Commission is authorized to deposit funds in certificates of deposit and other time deposits in banks covered by the Governmental Unit Depository Protection Act, NJSA 17:9-14 et seq. (GUDPA).

The Commission is also authorized to invest its assets in the New Jersey Cash Management Fund.

4.) **Authority for Investment Management**

The Treasurer is authorized and directed to make investments, with a maturity of three months or longer, through asset managers that may be selected by the Executive Committee. Such asset managers shall be discretionary trustees of the COMMISSION.

Their actions and decisions shall be consistent with this plan and all appropriate regulatory constraints.

In executing investments, asset managers shall minimize transaction costs by querying prices from at least three (3) dealers and purchasing securities on a competitive basis. When possible, federal securities shall be purchased directly from the US Treasury. Transactions shall not be processed through brokerages, which are organizationally affiliated with the asset manager. Transactions may also be processed through the New Jersey Division of Investment by the Commission's asset managers.

5.) **Preservation of Capital**

Securities shall be purchased with the ability to hold until maturity.

6.) **Safekeeping**

Securities purchased on behalf of the Commission shall be delivered electronically or physically to the Commission's custodial bank, which shall maintain custodial and/or safekeeping accounts for such securities on behalf of the Commission.

7.) **Selection of Asset Managers, Custodial Banks and Operating Banks**

Asset managers, custodial banks and operating banks shall be retained for contract periods of one (1) year. Additionally, the Commission shall maintain the ability to change asset managers and/or custodial banks more frequently based upon performance appraisals and upon reasonable notice, and based upon changes in policy or procedures.

8.) **Reporting**

If the Commission utilizes the services of asset managers, they will submit written statements to the Treasurer and Executive Director describing the proposed investment strategy for achieving the objectives identified herein. Asset managers shall also submit revisions to strategy when justified as a result of changing market conditions or other factors. Such statements shall be provided to the Treasurer and Executive Director. The statements shall also include confirmation that all investments are made in accordance with this plan. Additionally, the Investment Manager shall include a statement that verifies the Investment Manager has reconciled and determined the appropriate fair value of the Commissions portfolio based on valuation guidelines that shall be kept on file in the Executive Director's office.

The Treasurer shall report to the Executive Committee at all regular meetings on all investments. This report shall include information on the balances in all bank and investment accounts, and purchases, sales, and redemptions occurring in the prior month.

9.) **Audit**

This plan, and all matters pertaining to the implementation of it, shall be subject to the Commission's annual audit.

10.) **Cash Flow Projections**

Asset maturity decisions shall be guided by cash flow factors payout factors supplied by the Commission Actuary and reviewed by the Executive Director and the Treasurer.

11.) **Cash Management**

All moneys turned over to the Treasurer shall be deposited within forty-eight (48) hours in accordance with NJSA 40A:5-15.

In the event a check is made payable to the Treasurer rather than the Commission, the following procedure is to be followed:

- a.) The Treasurer endorses the check to the Commission and deposits it into the Commission account.
- b.) The Treasurer notifies the payer and requests that in the future any check be made payable to the Commission.

The Treasurer shall minimize the possibility of idle cash accumulating in accounts by assuring that all amounts in excess of negotiated compensating balances are kept in interest bearing accounts or promptly swept into the investment portfolio.

The method of calculating banking fees and compensating balances shall be documented to the Executive Committee by the Treasurer at least annually.

Cash may be withdrawn from investment pools under the discretion of asset managers only to Commission operations, claims imprest accounts, or approved dividend payments.

The Treasurer shall escheat to the State of New Jersey checks, which remain outstanding for twelve or more months after the date of issuance. However, prior to implementing such procedures, the Treasurer, with the assistance of the claims agent, as needed, shall confirm that the outstanding check continues to represent a valid claim against the Commission.

RESOLUTION NO. 7-17

**CUMBERLAND COUNTY INSURANCE COMMISSION
DESIGNATING AUTHORIZED SIGNATURES FOR COMMISSION BANK ACCOUNTS**

BE IT RESOLVED by the CUMBERLAND COUNTY INSURANCE COMMISSION (hereinafter the Commission) that all funds of the Commission shall be withdrawn from the official named depositories by check, which shall bear the signatures of at least two (2) of the following persons who are duly authorized pursuant to this resolution, except for those checks in the amount of \$100,000 or more and in that instance at least three signatures shall be required; and

Gerald Seneski

Ken Mecouch

Anthony Bontempo

BE IT FURTHER RESOLVED that for funds in the amount of \$2,500 or less, withdrawn from the official named depositories by check prepared by the Commission’s Claims Administrator for the purposes of satisfying workers compensation claims, such checks shall bear the signature of at least one (1) of the following persons who are duly authorized pursuant to this resolution.

Gerald Seneski

Ken Mecouch

Anthony Bontempo

ADOPTED by the CUMBERLAND COUNTY INSURANCE COMMISSION at a properly noticed meeting held on February 2, 2017.

ADOPTED:

BY: _____
CHAIRMAN

ATTEST:

VICE CHAIRMAN

RESOLUTION NO. 8 -17

**CUMBERLAND COUNTY INSURANCE COMMISSION
APPOINTING AGENT FOR SERVICE OF PROCESS AND CUSTODIAN OF RECORDS
FOR THE COMMISSION
FOR THE YEAR 2017**

WHEREAS, the CUMBERLAND COUNTY INSURANCE COMMISSION (hereinafter “CCIC”) is duly constituted as an Insurance Commission pursuant to N.J.S.A. 40A:10-6 et seq.; and

WHEREAS, the CCIC has deemed it necessary and appropriate to formally organize for the 2017 commission year; and

NOW THEREFORE be it resolved by the Cumberland County Insurance Commission that **PERMA Risk Management Services** is hereby appointed as agent for service of process upon the CCIC, at its offices located at 9 Campus Drive, Suite 16, Parsippany, NJ 07054 and at 401 Route 73, Marlton NJ 08053 for the year 2017 or until its successor has been appointed and qualified. Said appointment shall be at no cost to the CCIC.

BE IT FURTHER RESOLVED that **PERMA Risk Management Services** shall also be the Custodian of Records at no cost to the CCIC.

ADOPTED by the CUMBERLAND COUNTY INSURANCE COMMISSION at a properly noticed meeting held on February 2, 2017.

ADOPTED:

BY: _____
CHAIRMAN

ATTEST:

VICE CHAIRMAN

RESOLUTION NO. 9 -17

**CUMBERLAND COUNTY INSURANCE COMMISSION
DESIGNATING OFFICIAL NEWSPAPER(S) FOR THE COMMISSION**

WHEREAS, the CUMBERLAND COUNTY INSURANCE COMMISSION (hereinafter “CCIC”) is duly constituted as an Insurance Commission pursuant to N.J.S.A. 40A:10-6 et seq.; and

WHEREAS, the CCIC has deemed it necessary and appropriate to formally organize for the 2017 commission year; and

BE IT RESOLVED by the CCIC, the **Daily Journal and/or The South Jersey Times** are hereby designated as the official newspapers for the Commission and all official notices required to be published and shall be published in these newspapers.

BE IT FURTHER RESOLVED that the designation of official newspapers shall be effective upon adoption of the within resolution through the 2018 re-organization of the CCIC.

BE IT FURTHER RESOLVED that in the case of special meetings or emergency meetings, the CCIC shall give notice of said meetings.

ADOPTED by the CUMBERLAND COUNTY INSURANCE COMMISSION at a properly noticed meeting held on February 2, 2017.

ADOPTED:

BY: _____
CHAIRMAN

ATTEST:

VICE CHAIRMAN

RESOLUTION NO. 10 – 17

**CUMBERLAND COUNTY INSURANCE COMMISSION
ESTABLISHING PUBLIC MEETING PROCEDURES**

WHEREAS, the CUMBERLAND COUNTY INSURANCE COMMISSION (hereinafter “CCIC”) is duly constituted as an Insurance Commission pursuant to N.J.S.A. 40A:10-6 et seq.; and

WHEREAS, the CCIC has deemed it necessary and appropriate to formally establish meeting procedures for the 2017 Fund Year; and

NOW, THEREFORE BE IT RESOLVED, by the Commissioners of the Cumberland County Insurance Commission that the CCIC shall hold public meetings during the year 2017 as follows:

<u>TIME</u>	<u>DATE</u>	<u>LOCATION</u>	<u>PURPOSE</u>
11:00 AM	April 6, 2017	Cumberland County Administration Bldg. 164 West Broad Street Bridgeton, NJ 08302	Regular Meeting
11:00 AM	June 1, 2017	“	Regular Meeting
11:00 AM	August 3, 2017	“	Regular Meeting
11:00 AM	October 5, 2017	“	Regular Meeting
11:00 AM	December 7, 2017	“	Regular Meeting
11:00 AM	February 1, 2018	“	Reorganization Meeting

ADOPTED by the CUMBERLAND COUNTY INSURANCE COMMISSION at a properly noticed meeting held on February 2, 2017.

ADOPTED:

BY: _____
CHAIRMAN

ATTEST:

VICE CHAIRMAN

RESOLUTION NO. 11 – 17

**Cumberland County Insurance Commission
2017 Plan of Risk Management**

BE IT RESOLVED by the Insurance Commission's governing body that effective 1/1/17, the 2017 Plan of Risk Management shall be:

- 1.) The perils or liability to be insured against.
 - a.) The Insurance Commission insures the following perils or liability:
 - Workers' Compensation including Employer's Liability, USL&H and Harbor Marine/Jones Act.
 - General Liability including Law Enforcement Liability and Employee Benefits Liability.
 - Automobile Liability including PIP and Uninsured/Underinsured Motorists Coverage.
 - Property, Auto Physical Damage and Boiler & Machinery.
 - b.) The following coverage are provided to the Insurance Commission's member entities by their membership in the New Jersey Counties Excess Joint Insurance Fund (NJC).
 - Excess Workers' Compensation
 - Excess General Liability
 - Excess Auto Liability
 - Excess Property including Boiler and Machinery
 - Public Officials Liability/School Board Legal/Employment Practices Liability
 - Crime
 - Pollution Liability
 - Medical Professional and General Liability

- Employed Lawyers Liability
- Cyber Liability
- Non-Owned Aircraft Liability

2.) The limits of coverage.

a.) Workers' Compensation limits.

- The Insurance Commission covers \$300,000 per occurrence including:
 - Employer's Liability - \$300,000 per occurrence.
 - USL&H – \$300,000 per occurrence.
 - Harbor Marine/Jones Act - \$300,000 per occurrence.
- The NJC covers excess workers compensation claims to the following limits.
 - Workers' Compensation – Statutory excess of the Insurance Commission's \$250,000.
 - Employer's Liability - at a sub-limit of \$25,750,000 excess of the Insurance Commission's \$250,000.
 - USL&H – \$250,000 less NJ State benefits excess of member's SIR of \$300,000.
 - Harbor Marine/Jones Act - \$250,000 less NJ State benefits excess of member's SIR of \$300,000.

NJC retains limits of \$250,000 excess \$300,000 for Workers Compensation and Employers Liability. NJC purchases from Wesco Insurance Company \$450,000 excess \$500,000 each occurrence/employee and purchases from Safety National Casualty Company 'Statutory' Workers Compensation limits excess of \$1,000,000 and \$5,000,000 excess of \$1,000,000 for Employers Liability. Additional Employers Liability limits of \$5,000,000 excess of \$6,000,000 are purchased from Underwriters at Lloyds, excess \$15,000,000 from National Casualty

b.) General Liability limits.

- The Insurance Commission covers \$250,000 per occurrence.
 - Law Enforcement - included in the General Liability limits.

- Employee Benefits Liability - included in the General Liability limits.
 - Subsidence - \$250,000 per occurrence
 - Owned Watercraft 35' in length or less - \$250,000.
 - Garagekeepers Legal Liability - \$250,000
- The NJC covers excess liability claims as follows:
 - General Liability - \$20,250,000 excess the Insurance Commission's \$250,000. The \$5,000,000 excess \$500,000 commercial excess layer is subject to a \$10,000,000 annual aggregate per member insurance commission for the policy period of 1/1/17-18. The \$15,000,000 excess \$5,500,000 commercial excess layer is subject to a \$15,000,000 annual aggregate limit (1/1/17-1/1/18).
 - Law Enforcement - included in the NJC's excess General Liability limits.
 - Employee Benefits Liability - included in the NJC's excess General Liability limits.
 - Subsidence - \$750,000 per occurrence excess of the Insurance Commission's \$250,000. NJC retains 100% of the limit excess of the Member's retention.
 - Owned Watercraft 35' in length or less - \$750,000 excess of the Insurance Commission's \$250,000. NJC retains 100% of the limit excess of the Member's retention.
 - Garagekeepers Legal Liability - \$250,000 excess of the Insurance Commission's \$250,000. NJC retains 100% of the limit excess of the Member's retention.

NJC retains limits of \$250,000 excess \$250,000 and purchases from Underwriters at Lloyds limits of \$5,000,000 per occurrence and a \$10,000,000 aggregate for the annual policy period 1/1/17-18 excess over and above \$500,000. NJC also purchases from National Casualty limits of \$15,000,000 per occurrence and a \$15,000,000 annual aggregate (1/1/17-1/1/18) excess over and above the \$5,000,000/\$10,000,000 with Underwriters at Lloyds.

c.) Automobile Liability limits.

- The Insurance Commission covers automobile liability claims as follows:
 - Automobile Bodily Injury and Property Damage Liability claims at a combined single limit of \$250,000.
 - The Insurance Commission covers \$250,000 for Personal Injury Protection (PIP) per Addendum I of this Plan.
 - The Insurance Commission covers \$15,000/\$30,000/5,000 for Underinsured/Uninsured Motorists Liability per Addendum II of this Plan.
- The NJC covers excess automobile liability claims as follows:
 - Automobile Bodily Injury and Property Damage Liability claims excess of the Insurance Commission's \$250,000 CSL limit. Included in the NJC's excess General Liability limits as shown above.

NJC retains limits of \$250,000 excess \$250,000 and purchases from Underwriters at Lloyd's limits of \$5,000,000 per occurrence and a \$10,000,000 aggregate excess over and above \$500,000. NJC also purchases from National Casualty limits of \$15,000,000 per occurrence and a \$15,000,000 annual aggregate (1/1/17-1/1/18) excess over and above the \$5,000,000/\$10,000,000 with Underwriters at Lloyds.

The NJC does not provide excess PIP OR Uninsured/Underinsured Motorist Coverage.

The excess general liability, auto liability, law enforcement liability and employers liability limits with Underwriters at Lloyds, National Casualty are per member Commission and are shared limits amongst CUIC member entities.

- Liability
- d.) Public Officials Liability/School Board Legal/Employment Practices
- The NJC via the commercial market covers public officials liability, school board legal liability (where applicable) and employment practices liability as follows:
 - \$10,000,000 each claim and in the annual aggregate on a claims made basis per member Insurance Commission subject to the retentions as outlined below:
 - Cumberland County - \$100,000 POL/\$250,000 EPL
 - Cumberland County IA - \$15,000 POL/\$25,000 EPL
 - Cumberland County UA - \$15,000 POL/\$25,000 EPL

e.) Excess Public Officials Liability/Employment Practices
Liability/School Board Legal Liability:

- The NJC does not purchase an additional excess public officials liability/school board legal liability/employment practices liability program.

f.) Property/Equipment Breakdown

Property Limits/Sub-limits

- The Insurance Commission covers \$100,000 per occurrence less applicable member entity per occurrence deductibles.
- The NJC provides excess property coverage and Equipment Breakdown coverage via the commercial market with Zurich and excess property coverage with Mitsui Sumitomo Insurance Company of America (33.33%); Velocity (33.33%); Starr Companies (33.33%) quota share basis with the following limits (*SHARED BY ALL NJC MEMBER COMMISSIONS AND THEIR MEMBER ENTITIES*) excess of the member retention and member entity per occurrence deductibles:

Property Per Occurrence Limits:

- A. \$110,000,000 Per Occurrence with Zurich
- B. \$150,000,000 Per Occurrence with Mitsui Sumitomo Insurance Company of America (33.33%); Velocity (33.33%); Starr Companies (33.33%)
- C. \$260,000,000 per Occurrence Total Program Limit

Property Sub-Limits:

- Earthquake - \$200,000,000 (Annual Aggregate)
- Flood - \$100,000,000 (Annual Aggregate) Except;
 - Flood Inside Special Flood Hazard Area (SFHA) - \$25,000,000
- Asbestos Cleanup - \$50,000 per occurrence
- Valuable Paper And Records - \$10,000,000
- Accounts Receivable - \$10,000,000
- Demolition & Increased Cost of Construction -\$25,000,000
- Business Interruption -Included in \$110,000,000 blanket limit (Business Income On Revenue Producing Property Only)
- Extra Expense – \$10,000,000
- Transit- \$1,000,000 Per Conveyance/\$1,000,000 Per Occurrence
- Fine Arts - \$2,500,000 (Owned And Non Owned)

- Pollution And Contamination Cleanup (Limited) - \$250,000 (Annual Aggregate)
 - Miscellaneous Unnamed Locations - \$10,000,000
 - New Construction and Additions \$25,000,000 (the lesser of \$1,000,000 sublimit or 60 days for soft costs, subject to applicable deductible per cause of loss and 24 hour qualifying period)
 - Newly Acquired Locations – \$25,000,000 per location (90 day reporting period)
 - Service Interruption - \$10,000,000 Combined Time Element and Property Damage Including Overhead Transmission Lines within 1 mile of insured premises, 24 hour qualifying period)
 - Ingress/Egress – 30 Day Period for Property with a 5 mile radius not to exceed a \$5,000,000 limit
 - Debris Removal - \$25,000,000
 - Civil Government Authority – Lesser of \$5,000,000 or 30 day period, within 5 mile radius
 - Leasehold Interest - \$15,000,000
 - Loss Of Rents - \$15,000,000
 - Professional Fees - \$1,250,000
 - Extended Period of Liability – 365 Days
 - Auto Physical Damage - \$15,000,000
 - Underground Piping - \$5,000,000 (only if within 5 MILES of a pump station, process plant, metering pit, wells or similar operational locations which are owned, leased, used occupied or intended for use by the member entity). There is no coverage for the perils of earthquake, Flood or named Storm
 - EDP Equipment – Subject to a 24 hour qualifying period. No sub-limit for equipment. \$1,000,000 sublimit for data and software
 - Outdoor Property - \$10,000,000
 - Equipment Breakdown - \$100,000,000
 - Ammonia Contamination - \$5,000,000
 - Spoilage - \$5,000,000
 - Extended Period Of Indemnity - 365 Days
- Note: There is an Excess Property Policy with Mitsui Sumitomo Insurance Company of America (33.33%); Velocity (33.33%); Starr Companies (33.33%) on a quota share basis which extends the Per Occurrence Policy Limits by \$150,000,000 to a total of \$260,000,000. The excess policy provides a sub-limit of \$25,000,000 excess of the underlying \$110,000,000 per occurrence for Named Storm Wind and Hail for Atlantic, Cape May, Ocean, Monmouth and Cumberland counties. Coverage sub-limits on the Primary policy are excluded by the Excess Property policy, including Equipment Breakdown. The primary limit is \$110,000,000.

- There is an Excess Flood/Earthquake policy placed with Aspen Specialty (20%)/AXIS Surplus (30%)/United Specialty (20%)/Endurance American Specialty(10%)/Interstate Fire & Casualty (10%)/RSUI Indemnity (10%) which provides:
 - \$50,000,000 aggregate policy limit for Flood coverage excess of the aggregate policy limits provided by Zurich (\$25,000,000 for locations inside the 100-Year Flood Zone, \$50,000,000 for all other locations, as noted above); and
 - \$100,000,000 aggregate policy limit for Earthquake coverage excess of the \$100,000,000 aggregate policy limit provided by Zurich (noted above).

Property Deductibles

- The standard member insurance commission retention is \$100,000 per occurrence less member entity per occurrence deductibles below. Also applies to time element, auto physical damage and flood (except as noted below).
 - Cumberland County - \$5,000 Property and Auto Physical Damage Comprehensive
 - Cumberland County IA- \$5,000 Property and \$1,000 Auto Physical Damage
 - Cumberland County UA - \$1,000 Property and \$1,000 Auto Physical Damage
- The Vacant Properties deductible is \$250,000
- The Equipment Breakdown deductible is \$25,000 member entity deductible per occurrence.
- The Earthquake Member Insurance Commission retention is \$100,000 per occurrence less member entity deductibles.
- The Flood Member Insurance Commission retention is \$100,000 per occurrence (combined property damage and time element) less member entity per occurrence deductibles.
- Flood loss for property within the Special Flood Hazard Area (SFHA) is subject to a deductible of \$500,000 each building for municipality buildings, and \$500,000 each building for building contents member entity deductible per occurrence; and \$100,000 for each building for loss of income or the National Flood Insurance Plan's (NFIP) maximum available limits for public entities, whichever is greater, regardless of whether National Flood Insurance program coverage is purchased or not. Losses shall also be adjusted subject to a \$100,000 per occurrence

Insurance Commission deductible for pumping stations, pistol ranges, vehicles and mobile equipment less the applicable member entity deductible.

- “Named Storm as respects to covered property in Atlantic, Ocean, Monmouth and Burlington Counties located east of the Garden State Parkway and any covered property in Cape May County” For Property Damage: subject to a deductible of 1% of the value, per the Schedule of Values on file with the company as of the date of loss, for those Buildings where the direct physical loss or damage occurred, per occurrence; For Time Element: 1% of the full 12 months Gross Earnings or Gross Profit values that would have been earned following the occurrence by use of the facilities at the Location where the direct physical loss or damage occurred and all other Locations where Time Element loss ensues, per occurrence. The 1% Time Element deductible does not apply Extra Expense. Combined PD and TE deductible subject to a minimum deductible of \$250,000 per Location and a maximum deductible of \$1,000,000 per occurrence.
- Note: Where there is and underlying Insurance Commission such as exist in Cumberland The Cumberland County Insurance Commission provides coverage for the difference in deductible for “insured property” resulting from “insured perils” (per the terms and conditions of the Zurich policy through the NJC JIF), but only for what is not reimbursed by FEMA less the member entity deductible. The Cumberland County Insurance Commission will not provide coverage for the difference in deductible for time element loss.

Named Storm is defined as any storm or weather disturbance that is named by the U.S. National Oceanic and Atmospheric Administration (NOAA) or the U.S. National Weather Service or the National Hurricane Center or any comparable worldwide equivalent.. Location is defined as a building(s) bounded on all sides by public streets, clear land space or open waterways, each not less than 50 feet wide, a site or tract of land occupied or available for occupancy with tangible property. If the Named Storm involves covered property within the 100-year flood zone, the 100-year flood zone deductible above applies.

- Underground Piping \$100,000 per occurrence less the member entity deductibles as stated above. There is no coverage for the perils of Earthquake, Flood or Named Storm
- Golf Carts - \$25,000

NJC does not retain any risk as it is fully insured in the commercial market.

g.) Crime

The NJC via the commercial market provides crime coverage at the following limits and deductibles (the Insurance Commission retains no risk for Crime):

Limit per occurrence:

- Cumberland County – \$1,000,000

Deductible per occurrence:

- Cumberland County – \$25,000

NJC does not retain any risk as it is fully insured in the commercial market.

h.) Pollution Liability

The NJC via the commercial market provides pollution liability coverage at the following limits and deductibles (the Insurance Commission retains no risk for Pollution Liability):

- Limit of Liability: \$1,000,000 per claim and \$1,000,000 annual aggregate-Cumberland County UA only. Limit of Liability: \$10,000,000 per claim and \$25,000,000 annual aggregate Cumberland County.
- Member Entity Deductible: \$25,000

NJC does not retain any risk as it is fully insured in the commercial market.

All policy aggregates limits are shared by the NJC member Commissions of Gloucester, Camden, Union and Burlington and their respective member entities.

i.) Medical Professional General Liability/Excess Medical Professional

The NJC via the commercial market provides medical professional general liability/excess medical professional coverage at the following limits and deductibles (the Insurance Commission retains no risk for medical professional general liability):

- Limit per claim/annual aggregate: \$1,000,000/\$3,000,000
 - This primary aggregate limit is shared by each member entity of each NJC member Commission.
- Excess Limit annual aggregate: \$20,000,000/\$20,000,000
 - Excess Limit is a Shared limit with CCIC, CuCIC, BCIC, GCIC ACIC and SCIC.
- Member Entity Deductibles GL and PL:
 - Cumberland County Outpatient Clinic – \$50,000
 - Department of Corrections - \$100,000

- Cumberland County – Department of Human Services – Division of Mental Health & Addiction Services. - \$50,000

NJC does not retain any risk as it is fully insured in the commercial market.

j.) Employed Lawyers Professional Liability

The NJC via the commercial market provides employed lawyers professional liability coverage at the following limits and deductibles (the Insurance Commission retains no risk for employed lawyers' professional liability):

- Limit per claim and annual aggregate: \$5,000,000/\$10,000,000
- Member Entity Self Insured Retentions:
 - Cumberland County \$25,000
 - All Other Entities: Not applicable

NJC does not retain any risk as it is fully insured in the commercial market.

All policy aggregates limits are shared by all NJC member Commissions and their respective member entities.

k.) Cyber Liability – Network Privacy & Security Liability

The NJC via the commercial market provides on an optional basis network privacy & security liability coverage at the following limits and deductibles (the insurance commission retains no risk for network privacy & security liability coverage):

- Limits per claim and annual aggregate:
 - Security & Privacy Liability: \$1,000,000
 - regulatory sub-limit: \$750,000*
 - Network Interruption (12 hour period): \$250,000
 - Event Management: \$250,000
 - Cyber Extortion: \$ 1,000,000
 - Minimum affected individuals: 100
 - Maximum affected individuals: \$500,000
- Retention per member entity:
 - Security & Privacy Liability: \$25,000
 - Regulatory: \$25,000
 - Network Interruption (12 hour period): \$25,000
 - Event Management: \$25,000
 - Cyber Extortion: \$ 25,000
 - Minimum affected individuals: 100
 - Maximum affected individuals: \$500,000

- Participating member entities are:
 - Cumberland County
 - Cumberland County Improvement Authority

1.) Non-Owned Aircraft. The NJCE covers \$9,000,000 CSL for Bodily Injury and Property Damage Liability, and \$5,000 medical expense for each passenger.

NOTICE: The above description is a general overview of the coverage and limits provided by the Insurance Commission. The actual terms and conditions are defined in the individual policy documents and this Risk Management Plan. All issues and/or conflicts shall be decided upon by the individual policy documents.

3.) The amount of risk to be retained by the Insurance Commission (except as noted in section 2. Limits of coverage).

- a.) Workers' Compensation (all coverages) - \$300,000 CSL
- b.) General Liability (all coverages) - \$250,000 CSL
- c.) Law Enforcement Liability – Included in General Liability
- d.) Automobile Liability
 - Property Damage & Bodily Injury - \$250,000 CSL
 - Underinsured/Uninsured - \$15,000/\$30,000/\$5,000 CSL
 - Personal Injury Protection - \$250,000 CSL
- e.) Public Officials Liability/School Board Legal/Employment Practices

Liability - None

- f.) Property/APD - \$100,000 per occurrence less member deductibles.
- g.) Crime – None
- h.) Pollution Liability – None
- i.) Medical Professional General Liability – None
- j.) Employed Lawyers Liability – None
- k.) Cyber Liability - None

4.) The amount of unpaid claims to be established.

a.) The general reserving philosophy is to set reserves based upon the probable total cost of the claim at the time of conclusion. Historically, on claims aged eighteen (18) months, the Insurance Commission expects the claims servicing company to set reserves at 85% accuracy. The Insurance Commission also establishes reserves recommended by the Insurance Commission's Actuary for claims that have been incurred but not yet reported so that the Insurance Commission has adequate reserves to pay all claims and allocated loss adjusted expense liability.

b.) Claims reserves are subject to regular review by the Insurance Commission's Executive Director/Administrator, Attorney, Board of Commissioners and claims servicing company. Reserves on large or unusual claims are also subject to review by the claims departments of the commercial insurance companies or reinsurance companies providing primary or excess coverages to the Insurance Commission either directly or through the NJC JIF.

5.) The method of assessing contributions to be paid by each member of the Insurance Commission.

a.) By November 15th of each year, the actuary computes the probable net cost for the upcoming Insurance Commission year by line of coverage and for each prior Insurance Commission year. The Actuary includes all budget items in these computations. The annual assessment of each participating member entity is its pro rata share of the probable net cost of the upcoming Insurance Commission year for each line of coverage as computed by the Actuary.

b.) The calculation of pro rata shares is based on each member's experience modified manual premium for that line of coverage. The Insurance Commission's Governing Body also adopts a capping formula which limits the increase of any member's assessment from the preceding year to the Insurance Commission wide average increase plus a percentage selected by the Governing Body. The total amount of each member's annual assessment is certified by majority vote of the Insurance Commission's Governing Body at least one (1) month prior to the beginning of the next fiscal year.

c.) The Treasurer deposits each member's assessment into the appropriate accounts, including the administrative account, and the claim or loss retention trust Insurance Commission account by Insurance Commission year for each type of coverage in which the member participates.

d.) If a member entity becomes a member of the Insurance Commission or elects to participate in a line of coverage after the start of the Insurance Commission year, such participant's assessments and supplement assessments are reduced in proportion to that part of the year which had elapsed.

e.) The Insurance Commission's Governing Body may by majority vote levy upon the participating member entities additional assessments wherever needed or so ordered by the Commissioner of Insurance to supplement the Insurance Commission's claim, loss retention or administrative accounts to assure the payment of the Insurance Commission's obligations. All supplemental assessments are charged to the participating member entities by

applicable Insurance Commission year, and shall be apportioned by the year's assessments for that line of coverage.

f.) Should any member fail or refuse to pay its assessments or supplemental assessments, or should the Insurance Commission fail to assess funds required to meet its obligations, the Chairman, or in the event by his or her failure to do so, the custodian of the Insurance Commission's assets, shall notify the Commissioner of Insurance and the Director of Community Affairs. Past due assessments shall bear interest at the rate established annually by the Insurance Commission's Governing Body.

6.) Procedures governing loss adjustment and legal expenses.

a.) The Insurance Commission engages a claims service company to handle all claims. The performance of the claims adjusters is monitored and periodically audited by the Executive Director's office, the Insurance Commission Attorney, the NJC's attorney's office, as well as the claims department of the NJC's five major excess insurers (i.e. Underwriters at Lloyds, National Casualty and Markel for excess liability; Wesco Insurance Company and Safety National Casualty Company for workers' compensation). Every three years, the NJC's internal auditors also conduct an audit.

b.) Each member entity is provided with a claims reporting procedure and appropriate forms.

c.) In order to control workers' compensation medical costs, the Insurance Commission has engaged a managed care organization (MCO) *through the claims service company* whose procedures are integrated into the Insurance Commission's claims process.

d.) To provide for quality defense and control costs, the Insurance Commission has established an approved defense attorney panel with firms which specialize in Title 59 matters. The performance of the defense attorneys is overseen by the Insurance Commission Attorney, as well as, the various firms which audit the claims adjusters.

7.) Coverage to be purchased from a commercial insurer, if any.

The Insurance Commission does not purchase commercial insurance.

8.) Reinsurance to be purchased.

The Insurance Commission does not purchase reinsurance.

9.) Procedures for the closure of Insurance Commission years, including the maintenance of all relevant accounting records.

a.) Not applicable at this time.

10.) Assumptions and Methodology used for the calculation of appropriate reserves requirements to be established and administered in accordance with sound actuarial principles.

a.) The general approach in estimating the loss reserves of the Insurance Commission is to project ultimate losses for each Insurance Commission year using paid and incurred loss data. Two traditional actuarial methodologies are used: the paid loss development method and the incurred loss development method. From the two different indications resulting from these methods the Insurance Commission Actuary chooses a "select" estimate of ultimate losses. Subtraction of the paid losses from the select ultimate losses yields the loss reserve liability or Insurance Commission funding requirement.

b.) The following is an overview of the two actuarial methods used to project the ultimate losses.

- Paid Loss Development Method - This method uses historical accident year paid loss patterns to project ultimate losses for each accident year. Because this method does not use case reserve data, estimates from it are not affected by changes in case reserving practices. However, the results of this method are sensitive to changes in the rate of which claims are settled and losses are paid, and may underestimate ultimate losses if provisions are not included for very large open claims.
- Case Incurred Loss Development Method - This method is similar to the paid loss development method except it uses historical case incurred loss patterns (paid plus case outstanding reserves) to estimate ultimate losses. Because the data used includes case reserve estimates, the results from this method may be affected by changes in case reserve adequacy.

11.) The maximum amount a certifying and approving officer may approve pursuant to N.J.A.C. 11:15-2.22.

- \$15,000 for workers compensation claims
- \$7,500 for liability claims
- With the advance approval of the Insurance Commission Attorney or Executive Director, the certifying and approving officer may also pay hospital bills if waiting until after the next regularly scheduled Insurance Commission meeting would result in the loss of a discount on such bills. When the certifying and approving officer utilizes this authority, a report shall be made to the Commissioners at their next meeting.

Adopted by the Governing Body this 2nd day of February 2017.

CUMBERLAND COUNTY INSURANCE COMMISSION

, CHAIRMAN

ATTEST:

, VICE CHAIRMAN

ADDENDUM I

2017 Risk Management Plan
Addendum #1

NEW JERSEY PERSONAL INJURY PROTECTION

With respects to coverage provided by this Addendum, the provisions of Policy PK1019016 – Coverage forms CA 00 01 12 93, IL 00 17 11 98, IL 00 21 07 02, IL 02080702 apply unless modified by this Addendum for a covered **auto** licensed or principally garaged in, or **garage operations** conducted in, New Jersey

This Addendum is effective January 1, 2017.

MEDICAL EXPENSE BENEFITS DEDUCTIBLE

The medical expense benefits are subject to a deductible of \$250 per **occurrence**.

Medical expense benefits applicable to:

A. The **named insured** and, if the **named insured** is an individual, any **family members** will be subject to a deductible of \$250 per **occurrence**.

B. insured **persons** other than the **named insured** and, if the **named insured** is an individual, any **family members** shall be subject to a separate deductible of \$250 per **occurrence**.

MEDICAL EXPENSE BENEFITS CO-PAYMENT

Medical expense benefits are subject to a co-payment of 20% per **occurrence** for amounts payable between the applicable deductible and \$5,000.

DELETION OF BENEFITS OTHER THAN MEDICAL EXPENSES OPTION

All Personal Injury Protection benefits other than medical expense benefits are deleted with respect to the **named insured** and, if the **named insured** is an individual, any **family members**, when indicated to the left. Refer to the Deletion Of Benefits Other Than Medical Expenses Provision.

MEDICAL EXPENSE BENEFITS-AS-SECONDARY OPTION

If the **named insured** is an individual, medical expense benefits with respect to the **named insured** and **family members**, are secondary to the health benefits plans under which the **named insured** and **family members** are insured, when indicated to the left.

A. Coverage

1. **Personal Injury Protection**

We will pay personal injury protection benefits for **bodily injury** sustained by an **eligible injured person** or an **insured person** caused by an **occurrence** occurring during the Policy period within the United States of America, its territories or possessions or Canada and arising out of the ownership, maintenance or use, including loading or unloading, of a **private passenger auto** as an auto.

These Personal Injury Protection Benefits consist of:

a. **Medical Expense Benefits**

An amount not exceeding **\$250,000** per person per **occurrence** for reasonable and necessary expenses incurred for medical, surgical, rehabilitation and diagnostic treatments and services, hospital expenses, ambulance or transportation services, medication and non-medical expenses that are prescribed by a treating **health care provider** for a permanent or significant brain, spinal cord or disfiguring injury.

Non-medical expense means charges for products and devices, not exclusively used for medical purposes or as durable medical equipment, such as vehicles, durable goods, equipment, appurtenances, improvements to real or personal property, fixtures and services and activities such as recreational activities, trips and leisure activities.

All medical expenses must be rendered by a **health care provider**, be **clinically supported** and consistent with the symptoms, diagnosis or indications of the **insured**. They must also be consistent with the most appropriate level of service that is in accordance with the standards of good practice and standard professional treatment protocols, including care paths for an **identified injury**. They must not be rendered primarily for the convenience of the **insured** or **health care provider** nor may they involve unnecessary testing or treatment.

However, medical expenses include any nonmedical remedial treatment rendered in accordance with recognized religious methods of healing.

b. **Income Continuation Benefits**

An amount not exceeding a limit of \$100 per week and a total limit of \$5,200 payable for the loss of income of an **income producer** during his or her lifetime, as a result of **bodily injury** disability, not to exceed net **income** normally earned during the period in which benefits are payable.

c. **Essential Services Benefits**

An amount not exceeding a limit of \$12 per day and a total limit of \$4,380 payable to an **eligible injured person** as reimbursement for payments made to others, for substitute essential services of the type actually rendered during his or her lifetime and which he or she would ordinarily have performed not for **income** but for the care and maintenance of himself or herself and persons related to the **eligible injured person** by blood, marriage or adoption (including a ward or foster child) who are residents of the same household as the **eligible injured person**.

d. **Death Benefits**

The amount or amounts payable in the event of the death of an **eligible injured person** as determined below:

- (1) If the **eligible injured person** was an **income producer** at the time of the **occurrence**, an amount equal to the difference between \$5,200 and all basic income continuation benefits paid for any loss of **income** resulting from his or her injury prior to his or her death;
- (2) If the **eligible injured person** ordinarily performed essential services for the care and maintenance of himself or herself, his or her family or family household, an amount equal to the difference between \$4,380 and all basic essential services benefits paid with respect to his or her injury prior to death.

e. **Funeral Expense Benefits**

An amount not exceeding \$1,000 of reasonable funeral, burial and cremation expenses incurred.

2. **Pedestrian Personal Injury Protection**

This coverage applies to **pedestrians** and only to **occurrences** which occur during the Policy period in New Jersey. With respect to an **insured motor vehicle** as described for this Coverage, Pedestrian Personal Injury Protection Coverage is the only Personal Injury Protection Coverage for that vehicle.

We will pay pedestrian personal injury protection benefits to an **eligible injured person**. These Pedestrian Personal Injury Protection benefits consist of:

a. **Medical Expense Benefits**

An amount not exceeding **\$250,000** per person per **occurrence** for reasonable and necessary expenses incurred for medical, surgical, rehabilitative and diagnostic treatments and services, hospital expenses, ambulance or transportation services, medical and non-medical expenses that are prescribed by a treating **health care provider** for a permanent or significant brain, spinal cord or disfiguring injury.

Non-medical expense means charges for products and devices, not exclusively used for medical purposes or as durable medical equipment, such as vehicles, durable goods, equipment, appurtenances, improvement to real or personal property, fixtures and services and activities such as recreational activities, trips and leisure activities.

All medical expenses must be rendered by a **health care provider**, be **clinically supported** and consistent with the symptoms, diagnosis or indications of the **insured**. They must also be consistent with the most appropriate level of service that is in accordance with the standards of good practice and standard professional treatment protocols, including care paths for an **identified injury**. They must not be rendered primarily for the convenience of the **insured** or **health care provider** nor may they involve unnecessary testing or treatment.

However, medical expenses include any nonmedical remedial treatment rendered in accordance with recognized religious methods of healing.

b. **Income Continuation Benefits**

An amount not exceeding a limit of \$100 per week and a total limit of \$5,200 payable for the loss of income of an **income producer** during his or her lifetime, as a result of **bodily injury** disability; not to exceed net **income** normally earned during the period in which benefits are payable.

c. **Essential Services Benefits**

An amount not exceeding a limit of \$12 per day and a total limit of \$4,380 payable to an **eligible injured person** as reimbursement for payment made to others, for substitute essential services of the type actually rendered during his or her lifetime and which he or she would ordinarily have performed not for **income** but for the care and maintenance of himself or herself and persons related to the **eligible injured person** by blood, marriage or adoption (including a ward or foster child) who are residents of the same household as the **eligible injured person**.

d. **Death Benefits**

The amount or amounts payable in the event of the death of an **eligible injured person** as determined below:

- (1) If the **eligible injured person** was an **income producer** at the of time the **occurrence**, an amount equal to the difference between \$5,200 and all basic income continuation benefits paid for any loss of **income** resulting from his or her injury prior to his or her death;
- (2) If the **eligible injured person** ordinarily performed essential services for the care and maintenance of himself or herself, his or her family or family household, an amount equal to the difference between \$4,380 and all basic essential services benefits paid with respect to his or her injury prior to death.

e. **Funeral Expense Benefits**

An amount not exceeding \$1,000 for reasonable funeral, burial cremation expenses incurred.

B. Exclusions

1. **Personal Injury Protection**

We will not pay Personal Injury Protection benefits for **bodily injury**:

- a. To a person whose conduct contributed to the **bodily injury** in any of the following ways:
 - (1) While committing a high misdemeanor or felony or seeking to avoid lawful apprehension or arrest by a police officer; or
 - (2) While acting with specific intent to cause injury or damage to himself or herself or others;

- b. To any person who, at the time of the **occurrence**, was the owner or registrant of a **private passenger auto** registered or principally garaged in New Jersey that was being operated without Personal Injury Protection Coverage;
- c. To any person who is not occupying a covered **auto**, other than the **named insured** or any **family member** or a resident of New Jersey, if the **occurrence** occurs outside of New Jersey;
- d. Arising out of the ownership, maintenance or use, including loading or unloading, of any vehicle while located for use as a residence or premises other than for transitory recreational purposes;
- e. Due to war, whether or not declared, civil war, insurrection, rebellion or revolution, or to any act or **CONDITION** incident to any of the foregoing;
- f. Resulting from the radioactive, toxic, explosive or other hazardous properties of nuclear material;
- g. To any person, other than the **named insured** or any **family member**, if such person is entitled to New Jersey Personal Injury Protection Coverage as a **named insured** or **family member** under the terms of any other Policy with respect to such coverage;
- h. To any **family member**, if such person is entitled to New Jersey Personal Injury Protection Coverage as a **named insured** under the terms of another Policy; or
- i. To any person operating or occupying a **private passenger auto** without the permission of the owner or the **named insured** under the Policy insuring that **auto**.
- j. To any person who is convicted of, or pleads guilty to:
 - (1) Operating a motor vehicle; or
 - (2) Allowing another person to operate a motor vehicle owned by that **insured** or in that **insureds** care, custody or control;
 while the **insured** or that other person:
 - (1) Is under the influence of intoxicating liquor or a narcotic, hallucinogenic or habit-producing drug; or
 - (2) Is later found to have a blood alcohol concentration by weight of alcohol in excess of the legal limit of the jurisdiction where the violation occurred.
- k. To any person who refused to submit to a chemical test after being arrested for operating a motor vehicle while under the influence of intoxicating liquor or a narcotic hallucinogenic or habit-producing drug.
- l. For the following diagnostic tests:
 - (1) Brain mapping;
 - (2) Iridology;
 - (3) Mandibular tracking and simulation;
 - (4) Reflexology;

- (5) Spinal diagnostic ultrasound;
- (6) Surface electromyography (surface EMG);
- (7) Surrogate arm mentoring; or
- (8) Any other diagnostic test that is determined to be ineligible for coverage under Personal Injury Protection Coverage by New Jersey law or regulation.

2. **Pedestrian Personal Injury Protection**

The EXCLUSIONS that apply to Personal Injury Protection also apply to Pedestrian Personal Injury Protection, except EXCLUSIONS b. and c., which do not apply to Pedestrian Personal Injury Protection Coverage.

C. Limit Of Insurance

1. Any amount payable by **us** as Personal Injury Protection benefits for **bodily injury** shall be reduced by:
 - a. All amounts paid, payable or required to be provided under any workers' compensation or employees' temporary disability law.
 - b. Medicare provided under federal law.
 - c. Benefits actually collected that are provided under federal law to active and/or retired military personnel.
2. Any amount payable by **us** as medical expense benefits will be limited by medical fee schedules, as promulgated by the New Jersey Department of Banking and Insurance for specific injuries or services.
3. Any amount payable for medical expense benefits as the result of any one **occurrence** shall be:
 - a. Reduced by the applicable deductible of \$500; and
 - b. Subject to the co-payment of 20% for the amount between the applicable deductible and \$5,000.
4. The applicable limit of income continuation benefits applies separately to each full, regular and customary work week of an **eligible injured person**. If this disability from work or employment consists of or includes only a part of such a week, **we** shall be liable for only that proportion of such weekly limit that the number of days lost from work or employment during the partial week bears to the number of days in his or her full work week.
5. If the Addendum indicates that the **named insured** has elected the Medical Expense Benefits As Secondary option, the following provisions apply to medical expense benefits:

a. **Priority Of Benefits**

- (1) The health benefits plans under which the **named insured** and any **family member** are insured shall provide primary coverage for **allowable expenses** incurred by the **named insured** and any **family member** before any medical expense benefits are paid by **us**.
- (2) This insurance shall provide secondary coverage for the medical expense benefits for **allowable expenses**, which remained uncovered.
- (3) The total benefits paid by the health benefits plans and this insurance shall not exceed the total amount of **allowable expenses**.

b. **Determination Of Medical Expense Benefits Payable**

- (1) To calculate the amount of **actual benefits** to be paid by **us**, **we** will first determine the amount of **eligible expenses** which would have been paid by **us**, after application of the deductible and co-payment indicated in this Addendum had the **named insured** not elected the Medical Expense Benefits As Secondary Coverage option.
- (2) If the remaining **allowable expenses** are:
 - (a) Less than the benefits calculated in Paragraph (1) above, **we** will pay **actual benefits** equal to the remaining **allowable expenses**, without reducing the remaining **allowable expenses** by the deductible or co-payment.
 - (b) Greater than the benefits calculated in Paragraph (1) above, **we** will pay **actual benefits** equal to the benefits calculated in Paragraph 1 above, without reducing the remaining **allowable expenses** by the deductible or co-payment.
- (3) **We** will not reduce the **actual benefits** determined in Paragraph 2.:
 - (a) By any deductibles or co-payments of the health benefits plans which have provided primary coverage for medical expense benefits; or
 - (b) For any **allowable expense** remaining uncovered which otherwise would not be an **eligible expense** under Personal Injury Protection Coverage, except as set forth in Paragraph (4) below.
- (4) In determining remaining uncovered **allowable expenses**, **we** shall not consider any amount for items of expense which exceed the dollar or percent amounts recognized by the medical fee schedules promulgated by the New Jersey Department of Banking and Insurance.
- (5) The total amount of medical expense benefits for the **named insured** or any **family member** per **occurrence** shall not exceed the maximum

amount payable for medical expense benefits under this Policy.

c. **Health Benefits Plan Ineligibility**

- (1) If, after the **named insured** has elected the Medical Expense Benefits As Secondary Coverage option, it is determined that the **named insured** or any **family member** did not have a health benefits plan in effect at the time an **occurrence** occurred which resulted in **bodily injury** to the **named insured** or any **family member**, medical expense benefits shall be provided to the **named insured** or any **family member**, subject to the following:
 - (a) Only Paragraph 1. of the Limit Of Insurance Provision will apply with respect to medical expense benefits.
 - (b) Any amount payable for medical expense benefits for the **named insured** and any **family member** as a result of any one **occurrence** shall;
 - (1) Be reduced by a deductible equal to the sum of \$750 plus the \$500 deductible indicated in this Addendum; and
 - (2) Be subject to a co-payment of 20% for amounts less than \$5,000 after the deductible has been applied.
 - (3) Be determined:
 - (i) By the medical fee schedules promulgated by the New Jersey Department of Insurance; or
 - (ii) By us, on a reasonable basis, considering the medical fee schedules for similar services or equipment in the region where the service or equipment was provided, if an item or expense is not included on the medical fee schedules.
 - (4) Not exceed the maximum amount payable for medical expense benefits under this Policy.
- (2) All items of medical expense incurred by the **named insured** or any **family member** for the treatment of **bodily injury** shall be **eligible expenses** to the extent the treatment or procedure from which the expenses arose:
 - (a) Is recognized on the medical fee schedules promulgated by the New Jersey Department of Banking and Insurance; or
 - (b) Are reasonable expenses in accordance with Section 4 of the New Jersey Reparation Reform Act.
- (3) **We** shall be entitled to recover the difference between:

- (a) The reduced premium paid under this Policy for the Medical Expense Benefits As Secondary option; and
- (b) The premium which would have been paid under this Policy had the **named insured** not elected such option.

We will not provide any premium reduction for the Medical Expense Benefits As Secondary option for the remainder of the Policy period.

- 6. The limit of insurance shown in this Addendum for weekly income continuation benefits shall be prorated for any period of **bodily injury** disability less than one week.

D. Changes in Conditions

All conditions stated in Policy #PK1019016 – Coverage forms CA 00 01 12 93, IL 00 17 11 98, IL 00 21 07 02, IL 02080702 apply, however:

- 1. The **Duties In The Event Of Occurrence**, Condition is amended by the addition of the following:
 - a. If an **eligible injured person, insured person** or the legal representative or survivors of either institutes legal action to recover damages for injury against a person or organization who is or may be liable in tort there for, he or she must promptly give **us** a copy of the summons and complaint or other process served in connection with the legal action.
 - b. The **eligible injured person, insured person** or someone on their behalf must promptly give us written proof of claim including:
 - (1) Full particulars of the nature and extent of the **bodily injury**; and
 - (2) Such other information that will help us determine the amount due and payable.
 - c. The **eligible injured person** or **insured person** must submit to physical examination by physicians when and as often as **we** reasonably require and a copy of the medical report will be forwarded to such **eligible injured person** or **insured person** if requested.
- 2. The following Conditions are added:
 - a. **Reimbursement And Trust**

Subject to any applicable limitations set forth in the New Jersey Automobile Reparation Reform Act, if **we** make any payment to any **eligible injured person** or **insured person** under this coverage and that person recovers from another party, he or she shall hold the proceeds in trust for **us** and pay **us** back the amount **we** have paid. **We** will have a lien against such payment, and may give notice of the lien to the person or organization causing **bodily injury**, his or her agent or insurer or a court having jurisdiction in the matter.

b. **Payment Of Personal Injury Protection Benefits**

- (1) Medical expense benefits and essential services benefits may be paid at our option to the **eligible injured person, insured person** or the person or organization furnishing the products or services for which such benefits are due. These benefits shall not be assignable except to providers of service benefits. Any such assignment is not enforceable unless the provider of service benefits agrees to be subject to the requirements of our Decision Point Review Plan. In the event of the death of an **eligible injured person** or **insured person** any amounts payable, but unpaid prior to death, for medical expense benefits are payable to the **eligible injured person's** or **insured person's** estate.
- (2) Benefits payable under Paragraph A.2.d.(1) of the description of death benefits are payable to the **eligible injured person's** surviving spouse, or if there is no surviving spouse, to his or her surviving children, or if there is not a surviving spouse or any surviving children, to the **eligible injured person's** estate.
- (3) Benefits payable under Paragraph A.1.d.(2) of the description of death benefits are payable to the person who has incurred the expense of providing essential services.
- (4) Funeral expense benefits are payable to the **eligible injured person's** or **insured person's** estate.

c. **Deletion Of Benefits Other Than Medical Expenses Option**

When the Addendum indicates that the Deletion Of Benefits Other Than Medical Expenses Option applies, **we** will pay personal injury protection benefits consisting only of medical expense benefits for the **named insured** and **family members**.

d. **Employee Benefits Reimbursement**

If the **eligible injured person** or **insured person** fails to apply for workers' compensation benefits or employees' temporary disability benefits for which that person is eligible, **we** may immediately apply to the provider of these benefits for reimbursement of any personal injury protection benefits that **we** have paid.

e. **Proof of Health Benefits Plan Coverage**

If the **named insured** has elected the Medical Expense Benefits As Secondary option, the **named insured** shall provide proof that the **named insured** and **family members** are insured by health insurance coverage or benefits in a manner and to an extent approved by the New Jersey Department of Banking and Insurance.

f. **Special Requirements For Medical Expenses**

(1) **Care Paths For Identified Injuries (Medical Protocols)**

- (a) The New Jersey Department of Banking and Insurance has established by regulation the standard courses of medically necessary diagnosis and treatment for **identified injuries**. These courses of diagnosis and treatments are known as care paths.

The care paths do not apply to treatment administered during **emergency care**.

- (b) Upon notification to use of a **bodily injury** covered under this Policy, **we** will advise the **insured** of the care path requirements established by the New Jersey Department of Banking and Insurance.
- (c) Where the care paths indicate a decision point, further treatment or the administration of a diagnostic test is subject to our Decision Point Review Plan.

A decision point means the juncture in treatment where a determination must be made about the continuation or choice of further treatment of an **identified injury**.

(2) **Coverage For Diagnostic Tests**

- (a) In addition to the care path requirements for an **identified injury**, the administration of any of the following diagnostic tests is also subject to the requirements of our Decision Point Review Plan:
- (i) Brain audio evoked potential (BAEP);
 - (ii) Brain evoked potential (BEP);
 - (iii) Computer assisted tomographic studies (CT, CAT Scan);
 - (iv) Dynatron/cyber station/cybex;
 - (v) Electroencephalogram (EEG);
 - (vi) H-reflex Study;
 - (vii) Magnetic resonance imaging (MRI);
 - (viii) Needle electromyography (needle EMG);
 - (ix) Nerve conduction velocity (NCV);
 - (x) Somatosensory evoked potential (SSEP);
 - (xi) Sonogram/ultrasound;
 - (xii) Videofluoroscopy;
 - (xiii) Visual evoked potential (VEP); or
 - (xiv) Any other diagnostic test that is subject to the requirements of our Decision Point Review Plan by New Jersey law or regulation.

- (b) The diagnostic tests listed under Paragraph (2)(a) must be administered in accordance with New Jersey Department of Banking and Insurance regulations which set forth the requirements for the use of diagnostic tests in evaluating injuries sustained in **auto accidents**.

However, those requirements do not apply to diagnostic tests administered during **emergency care**.

- (c) **We** will pay for other diagnostic tests that are:
 - (i) Not subject to our Decision Point Review Plan; and
 - (ii) Not specifically excluded under EXCLUSION 1.1.;

only if administered in accordance with the criteria for medical expenses as provided in this ENDORSEMENT.

(3) **Decision Point Review Plan**

- (a) Coverage for certain medical expenses under this Addendum is subject to our Decision Point Review Plan, which provides appropriate notice and procedural requirements that must be adhered to in accordance with New Jersey law or regulation. **We** will provide a copy of this plan upon request, or in the event of any claim for medical expenses under this coverage.
- (b) Our Decision Point Review Plan includes the following minimum requirements as prescribed by New Jersey law or regulation:
 - (i) The requirements of the Decision Point Review Plan only apply after the tenth day following the **occurrence**.
 - (ii) **We** must be provided prior notice as indicated in our plan, with appropriate **clinically supported** findings, that additional treatment for an **identified injury** or the administration of a diagnostic test listed under Paragraph (2)(a) is required.

The notice and **clinically supported** findings may include a comprehensive treatment plan for additional treatment.

- (c) Once **we** receive such notice with the appropriate **clinically supported** findings, **we** will, in accordance with our plan:
 - (i) Promptly review the notice and supporting materials; and
 - (ii) If required as part of our review, request any additional medical records or schedule a physical examination.
- (d) **We** will then determine and notify the **eligible injured person** or the **insured person** whether **we** will provide coverage for the additional treatment or diagnostic test as indicated in our plan. Any determination **we** make will be based on the determination

of a **health care provider**.

- (e) Any physical examination of an **eligible injured person** or **insured person** scheduled by **us** will be conducted in accordance with our plan.
- (f) A penalty will be imposed in accordance with **our** plan if:
 - (i) **We** do not receive proper notice and **clinically supported** findings;
 - (ii) **We** are not provided medical records if requested by **us**;
or
 - (iii) Any **eligible injured person** or **insured person** fails to appear for the physical examination if required by **us**.

g. **Dispute Resolution**

If **we** and any person seeking Personal Injury Protection Coverage do not agree as to the recovery of Personal Injury Protection Coverage under this Addendum, then the matter may be submitted to dispute resolution, on the initiative of any party to the dispute, in accordance with New Jersey law or regulation.

Any request for dispute resolution may include a request for review by a medical review organization.

- 3. The following Condition is added for **Personal Injury Protection** and **Pedestrian Personal Injury Protection**:

COORDINATION AND NON-DUPLICATION

- a. Regardless of the number of **autos** insured for basic personal injury protection coverage pursuant to Section 4 of the New Jersey Automobile Reparation Reform Act or the number of insurers or policies providing such coverage, there shall be no duplication of payment of basis personal injury protection benefits and the aggregate maximum amount payable under this and all applicable policies with respect to **bodily injury** to any one person as the result of any one **occurrence** shall not exceed the applicable amounts or limits specified in Section 4 of said Act.
- b. If an **eligible injured person** under this coverage is also an **eligible injured person** under other complying policies, the insurer paying benefits to such person shall be entitled to recover from each of the other insurers an equitable pro rata in the proportion that the insurer's liability bears to the total of all applicable limits. Complying Policy means a Policy of automobile liability insurance maintained pursuant to the requirements of Section 3 of the New Jersey Automobile Reparation Reform Act and providing basic personal injury protection coverage as approved by the Commissioner of Insurance.

- 4. The following Condition is added for **Personal Injury Protection**:

MEDICAL PAYMENTS DELETION

In consideration of the Coverage provided for Personal Injury Protection and in Paragraphs A.1. and A.2. of this Addendum, and the adjustment of applicable rates because of **bodily injury** to an **eligible injured person**, any auto medical payments coverage provided under the coverage part is deleted with respect to an **auto** which is a covered **auto**.

E. Definitions

The **Definitions** Section is amended as follows:

1. The definition of **bodily injury** is replaced by the following:

Bodily injury means bodily harm, sickness or disease, including an **identified injury** or death that results.

2. The following definitions are added for **Personal Injury Protection**, and **Pedestrian Personal Injury Protection**:

- a. **Actual benefits** means those benefits determined to be payable for **allowable expenses**.
- b. **Allowable expense** means a medical necessary, reasonable and customary item of expense covered as benefits by the **named insured's** or **family member's** health benefits plan or personal injury protection benefits as an **eligible expense**, at least in part. When benefits provided are in the form of services, the reasonable monetary value of each such service shall be considered as both an **allowable expense** and a paid benefit.
- c. **Clinically supported** means that a **health care provider**, prior to selecting, performing or ordering the administration of a treatment or diagnostics test, has:
 - (1) Physically examined the **eligible injured person** or **insured person** to ensure that the proper medical indications exist to justify ordering the treatment or test;
 - (2) Made an assessment of any current and/or historical subjective complaints, observations, objective findings, neurologic indications, and physical tests;
 - (3) Considered any and all previously performed tests that relate to the injury and the results and which are relevant to the proposed treatment or test; and
 - (4) Recorded and documented these observations, positive and negative findings and conclusions on the **insureds** medical records.
- d. **Eligible expense** means:

- (1) In the care of health benefits plans, that portion of the medical expenses incurred for the treatment of **bodily injury** which is covered under the terms and CONDITIONS of the plan, without application of the deductible(s) and co-payment(s), if any.
 - (2) In the case of personal injury protection benefits, that portion of the medical expenses incurred for the treatment of **bodily injury** which, without considering any deductible and co-payment, shall not exceed:
 - (a) The percent or dollar amounts specified on the medical fee schedules, or the actual billed expense, whichever is less; or
 - (b) The reasonable amount, as determined by us, considering the medical fee schedules for similar services or equipment in the region where the service or equipment was provided, when an incurred medical expense is not included on the medical fee schedules.
- e. **Emergency care** means all treatment of a **bodily injury** which manifests itself by acute symptoms of sufficient severity such that absence of immediately attention could reasonably be expected to result in death, serious impairment to bodily functions or serious dysfunction to a bodily organ or part. Such emergency care shall include all medical necessary care immediately following an **occurrence**, including but not limited to, immediate pre-hospitalization care, transportation to a hospital or trauma center, emergency room care, surgery, critical and acute care. Emergency care extends during the period of initial hospitalization until the patient is discharged from acute care by the attending physician. Emergency care shall be presumed when medical care is initiated at a hospital within 120 hours of the **occurrence**.
- f. **Family member** means a person related to the **named insured** by blood, marriage or adoption (including a ward or foster child) who is a resident of the same household as the **named insured**.
- g. **Health care provider** means those persons licensed or certified to perform health care treatment or services compensable as medical expenses and shall include, but not be limited to:
- (1) Hospital or healthcare facilities that are maintained by a State or any of its political subdivisions or licensed by the Department of Health and Senior Services.
 - (2) Other hospitals or health care facilities designated by the Department of Health and Senior Services to provide health care services, or other facilities, including facilities for radiology and diagnostic testing, free-standing emergency clinics or offices, and private treatment centers;

- (3) A non-profit voluntary visiting nurse organization providing health care services other than in a hospital;
- (4) Hospitals or other health care facilities or treatment centers located in other states or nations;
- (5) Physicians licensed to practice medicine and surgery;
- (6) Licensed chiropractors, dentists, optometrists, pharmacists, chiropodists (Podiatrists), psychologists, physical therapists, health maintenance organizations, orthotists and prosthetists, professional nurses occupational therapists, speech language pathologists, audiologists, physician assistants, physical therapists assistants and occupational therapy assistants;
- (7) Registered bio-analytical laboratories;
- (8) Certified nurse-midwives and nurse practitioners/clinical nurse-specialists; or
- (9) Providers of other health care services or supplies including durable medical goods.

h. **Identifiable injury** means the following **bodily injuries** for which the New Jersey Department of Banking and Insurance has established standard courses of medically necessary diagnosis and treatment;

- (1) Cervical Spine: Soft Tissue Injury;
- (2) Cervical Spine: Herniated Disc/Radiculopathy;
- (3) Thoracic Spine: Soft Tissue Injury;
- (4) Thoracic Spine: Herniated Disc/Radiculopathy;
- (5) Lumbar-Sacral Spine: Soft Tissue Injury;
- (6) Lumbar-Sacral Spine: Herniated disc/Radiculopathy; and
- (7) Any other **bodily injury** for which the New Jersey Department of Banking and Insurance has established standard courses of appropriate diagnosis and treatment.

i. **Income** means salary, wages, tips commissions, fees and other earnings derived from work or employment.

j. **Income producer** means a person who, at the time of the **occurrence**, was in an occupational status, earning or producing income.

k. **Named insured** means the person or organization named in General Endorsements (SNS Gen **01-01** (04/10) and SNS GEN **01-06** (04-10) of Policy #PK1019016, if an individual, includes his or her spouse if the spouse is a resident of the household of the **named insured**, except that if the spouse ceases to be a resident of the same household, the spouse shall be a **named insured** for the full term of the Policy in effect at the time of cessation of residency. If the

covered **auto** is owned by a farm family co-partnership or corporation, the term **named insured** also includes the head of the household of each family designated in the Policy as having a working interest in the farm.

- l. **Pedestrian** means any person who is not occupying, using, entering into, or alighting from a vehicle propelled by other than muscular power and designed primarily for use on highways, rails and tracks.
- m. **Private passenger auto** means a self-propelled vehicle designed for use principally on public roads and which is one of the following types:
 - (1) A private passenger or station wagon type auto;
 - (2) A van, a pickup or panel truck or delivery sedan; or
 - (3) A utility auto designed for personal use as a camper or motor home or for family recreational purposes

A **private passenger auto** does not include:

- (a) A motorcycle;
- (b) An auto used as a public or livery conveyance for passengers;
- (c) A pickup or panel truck, delivery sedan or utility auto customarily used in the occupation, profession or business of an **insured** other than farming or ranching; or
- (d) A utility auto customarily used for the transportation of passengers other than members of the user's family or their guests.

3. The following definition is added to the **Definitions** Section for **Personal Injury Protection**:

Eligible injured person means:

- a. The **named insured** and, if the **named insured** is an individual, any **family member**, if the **named insured** or the **family member** sustains **bodily injury**:
 - (1) As a result of any **occurrence** while occupying, using, entering into or alighting from a **private passenger auto**, or
 - (2) While a **pedestrian**, caused by a **private passenger auto** or by an object propelled by or from a **private passenger auto**.
- b. Any other person who sustains **bodily injury**:
 - (1) While, with **your** permission, that person is occupying, using, entering into or alighting from the covered **auto**; or
 - (2) While a **pedestrian**, caused by the covered **auto** or as a result of being struck by an object propelled by or from the covered **auto**.

4. The following are added to the **Definitions** Section for **Pedestrian Personal Injury Protection**:

- a. **Eligible injured person** means:

A person who sustains **bodily injury** while a **pedestrian**, caused by an **Insured motor vehicle** or as a result of being struck by an object propelled by or from the **insured motor vehicle**.

- b. **Insured motor vehicle** means a self-propelled motor vehicle designed for use principally on public roads, which is not a **private passenger auto** and to which the liability coverage of this Coverage Form applies.

ADDENDUM II

2017 Risk Management Plan
Addendum #2
New Jersey Uninsured and Underinsured Motorists Coverage

With respects to coverage provided by this Addendum, the provisions of Policy #CP0513640 – Coverage forms CA 00 01 12 93, IL 00 17 11 98, IL 00 21 07 02, IL 02080702 apply unless modified by this Addendum.

This Addendum is effective January 1, 2017.

Limit of Insurance:

Bodily Injury: \$15,000 per person

\$30,000 per accident

Property Damage: \$ 5,000 per accident

A. Coverage

1. **We will pay all sums the insured is legally entitled to recover as compensatory damages from the owner or driver of an **uninsured and underinsured motor vehicle**. The damages must result from bodily injury sustained by the insured, or **property damage** caused by an accident. The owner's or driver's liability for these damages must result from the ownership, maintenance or use of an **uninsured and underinsured motor vehicle**.**
2. With respect to damages resulting from an occurrence with an underinsured motor vehicle, we will pay under this coverage only if a. or b. applies:
 - a. The limit of any applicable liability bonds or policies have been exhausted by judgments or payments ; or
 - b. A tentative settlement has been made between an insured and the insurer of an underinsured motor vehicle and we:
 - (1) Have been given prompt written notice of such tentative settlement; and
 - (2) Advanced payment to the insured in an amount equal to the tentative settlement within 30 days after receipt of notification.
3. Any judgment for damages arising out of a suit brought without **our** written consent is not binding on **us**.

B. Who is An Insured

If the Named Insured is designated in the General Endorsements (SNS Gen **01-01** (04/10) and SNS GEN **01-06** (04-10) of Policy #PK1019016 as:

1. An individual, then the following are insured:
 - i. The Named Insured and any family members.
 - ii. Anyone else **occupying** a covered auto or a temporary substitute for a covered auto. The covered auto must be out of service because of its breakdown, repair, servicing, loss or destruction.

- iii. Anyone for damages he or she is entitled to recovery because of bodily injury sustained by another insured.
- 2. A partnership, limited liability company, corporation or any other form of organization, then the following are insureds:
 - i. Anyone **occupying** a covered auto or a temporary substitute for a covered auto. The covered auto must be out of service because of its breakdown, repair, servicing, loss or destruction.
 - ii. Anyone for damages he or she is entitled to recover because of bodily injury sustained by another insured.

C. Exclusions

This insurance does not apply to any of the following:

- 1. With respect to an **uninsured and underinsured motor vehicle**, any claim settled without our consent.
- 2. Damages for pain, suffering and inconvenience resulting from bodily injury caused by an accident involving an **uninsured and underinsured motor vehicle** unless the injured person has a legal right to recover damages for such pain, suffering and inconvenience under the New Jersey Automobile Reparation Reform Act. The injured person's legal right to recover damages for pain, suffering and inconvenience under the New Jersey Automobile Reparation Reform Act will be determined by the liability tort limitation, if any, applicable to that person.
- 3. The direct or indirect benefit of any insurer or self-insurer under any workers' compensation, disability benefits or similar law.
- 4. The direct or indirect benefit of any insurer of property.
- 5. Anyone using a vehicle without a reasonable belief that the person is entitled to do so.
- 6. **Property damage** for which the Insured had been or is entitled to be compensated by other property or physical damage insurance.
- 7. The first \$500 of the amount of **property damage** to the property of each insured as the result of any one accident.
- 8. **Property damage** caused by a hit-and-run vehicle.
- 9. Punitive or exemplary damages.
- 10. Bodily injury or **property damage** sustained by an Insured who Is an owner of a motor vehicle:
 - i. Insured under a basic automobile insurance policy issued in accordance with New Jersey law or regulation; or
 - ii. Required to be insured in accordance with New Jersey law or regulation, but not insured for this coverage or any similar coverage.

However, this exclusion does not apply to an individual Named Insured, and such Named Insured's spouse, unless the individual Named Insured or such Named Insured's spouse are **occupying**, at the time of an accident, a motor vehicle described in Subparagraph a. or b. under Item B Who is An Insured.

D. Limit of Insurance

- 1. Regardless of the number of covered autos, insureds, premiums paid, claims made or vehicles involved in the accident, the Limit of Insurance shown in this Addendum for Uninsured Motorists Coverage is the most we will pay for all damages resulting from any one accident with an **uninsured and underinsured motor vehicle**.
 - i. However, subject to our maximum limit of Insurance for this coverage, if:
 - 1. An insured is not the individual named insured under this Coverage;
 - 2. That Insured is an individual named insured under one or more other policies providing similar coverage; and

3. All such other policies have a limit of insurance for similar coverage which is less than the Limit of Insurance for this coverage; then the most **we** will pay for all damages resulting from any one accident with an **uninsured and underinsured motor vehicle** shall not exceed the highest applicable limit of insurance under any coverage from or policy providing coverage to that insured as an individual named insured.
- ii. However, subject to our maximum Limit of Insurance for this coverage, if;
 1. An insured is not the individual named insured under this Addendum or any other policy;
 2. That insured is insured as a **family member** under one or more other policies providing similar coverage; and
 3. All such other policies have a limit of insurance for similar coverage which is less than the Limit of Insurance for this coverage;

Then the most **we** will pay for all damages resulting from any one accident with an **uninsured and underinsured motor vehicle** shall not exceed the highest applicable limit of insurance under any coverage form or policy provide coverage to that Insured as a **family member**.

2. With respect to damages resulting from an accident involving an **uninsured motor vehicle**, **we** will not make a duplicate payment under this Coverage for any element of loss for which payment has been made by or for anyone who is legally responsible.
3. No one will be entitled to receive duplicate payments for the same elements of loss under this Addendum and any Liability Coverage Form or Endorsement within Policy #PK1019016.

We will not pay for element of loss if a person is entitled to receive payment for the same elements of loss under any personal injury protect benefits.

E. Conditions

All "Other Insurance" Conditions stated in Policy #CP0513640 are deleted in their entirety and replaced with the following:

If there is other applicable insurance available under one or more policies or provisions of coverage:

1. The maximum recovery under all coverage forms or policies combined may equal but not exceed the highest applicable limit for any one vehicle under any coverage form or policy provided coverage on either a primary or excess basis.
However, if an Insured is:
 - i. An individual named insured under one or more policies providing similar coverage; and
 - ii. Not **occupying** a vehicle owned by that individual named insured;

then any recovery for damages for bodily injury or **property damage** for that insured may equal but not exceed the highest applicable limit for any one vehicle under any coverage form or policy provided coverage to that insured as an individual named insured.

However, if an insured is:

- i. Insured as a family member under one or more policies providing similar coverage;
- and

- ii. Not an individual named insured under this or any other Policy;

then any recovery for damages for bodily injury or **property damage** for that insured may equal but not exceed the highest applicable limit for any one vehicle under any coverage form or Policy provided coverage to that insured as a **family member**.

- 2. Any insurance provided with respect to a vehicle the Named Insured does not own shall be excess over any other collectible uninsured motorist's insurance providing coverage on a primary basis.
- 3. If the coverage under this Addendum is provided:
 - i. On a primary basis, **we** will pay only **our** share of the loss that must be paid under insurance providing coverage on a primary basis. Our share is the proportion that **our** limit of liability bears to the total of all applicable limits of liability for coverage on a primary basis.
 - ii. On an excess basis, **we** will pay **only** our share of the loss that must be paid under insurance providing coverage on an excess basis. **Our** share is the proportion that our limit of liability bears to the total of all applicable limits of liability for coverage on an excess basis.

F. Duties In The Event of Accident

All provisions as stated in Policy #PK1019016 and the following:

- 1. Promptly notify the policy if a hit-and-run driver is involved; and
- 2. Promptly send **us** copies of the legal papers if a suit is brought.
- 3. A person seeking coverage under this Addendum must also promptly notify **us**, in writing, of a tentative settlement between the **insured** and the insurer of an **underinsured motor vehicle**, and allow us to advance payment to that **insured** in an amount equal to the tentative settlement within 30 days after receipt of notification to preserve **our** rights against the insurer, owner or operator of such **underinsured motor vehicle**

G. Transfer of Rights of Recovery Against Others To Us

If **we** make any payment and the insured recovers from another party, the insured shall hold the proceeds in trust for us and pay us back the amount we have paid. Our rights do not apply under this provision with respect to damages caused by an **occurrence** with an **underinsured motor vehicle** if we:

- a. Have been given prompt notice in writing of a tentative settlement between an insured and the insurer of an **underinsured motor vehicle**; and
- b. Fail to advance payment to the **insured** in an amount equal to the tentative settlement within 30 days after receipt of notification

If **we** advance payment to the **insured** in an amount equal to the tentative settlement within 30 days after receipt of notification:

- (1) That payment will be separate from any amount the **insured** is entitled to recover Under the provisions of this endorsement; and
- (2) **We** also have a right to recover the advanced payment

H. Arbitration

- 1. If **we** and an insured disagree whether the insured is legally entitled to recover damages from the owner or driver of an uninsured and underinsured motor vehicle or

do not agree as to the amount of damages that are recoverable by that insured, then the matter may be arbitrated. However, disputes concerning coverage under this Addendum may not be arbitrated. Either party may make a written demand for arbitration. In this event each party will select an arbitrator. The two arbitrators will select a third. If they cannot agree within 30 days, either may request that selection be made by a judge of a court having jurisdiction. Each party will pay the expense it incurs and bear the expenses of the third arbitrator equally.

2. Unless both parties agree otherwise, arbitration will take place in the county in which the insured lives. Local rules of law as to arbitration procedure and evidence will apply. A decision agreed to by two of the arbitrators will be binding.

G. Additional Definitions

1. **Family member** means a person related to an individual Named Insured by blood, marriage, or adoption who is a resident of such Named Insured's household, including a ward or foster child.
 2. **Insured/we/us/our** means Cumberland County Insurance Commission
- Occupying** means in, upon, getting in, on, or out off.
3. **Property damage** means damage to a covered auto, or to any property of an insured while contained in a covered auto.
 4. **Underinsured motor vehicle** means the following:
 - i. With respect to an **insured** who:
 1. Is not the individual named insured under this Addendum; and
 2. Is an individual named insured under one or more other policies providing similar coverage

Underinsured motor vehicle means a land motor vehicle or **trailer** of any type to which a liability bond or Policy applies at the time of an **occurrence** but its limit of liability is less than the highest applicable limit of liability under any coverage form or Policy providing coverage to that

insured as an individual named insured

- ii. With respect to an **insured** who:
 1. Is not the individual named insured under this Policy or any other Policy; and
 2. Is insured as a **family member** under one or more other policies providing similar coverage,

Underinsured motor vehicle means a land motor vehicle **trailer** any type to which a liability bond or Policy applies at the time of an **occurrence** but its limit for liability is less than the highest applicable limit of liability under any coverage form or Policy providing coverage **insured** as a **family member**

with respect to any other **insured** who is not described in paragraphs i. or ii. above, underinsured motor vehicle means a land motor vehicle or trailer of any type to which a liability bond or policy applies at the time of an occurrence but its limit of liability is less than the limit of insurance for this coverage.

however, an **underinsured motor vehicle** does not include any vehicle:

3. Owned or operated by a self-insurer under any applicable motor vehicle law;
4. Owned by any governmental unit or agency
5. Operated on rails or crawler treads;
6. Designed for use mainly off public roads while not on public roads; or
7. While located for use as a residence or premises

8. Owned by or furnished or available for the regular use of the named Insured or, if the Named insured is an individual, any **family member**.

5. **Uninsured motor vehicle** means a land motor vehicles or trailer:
 - i. For which no liability bond or policy applies as the time of an accident;
 - ii. For which an insuring or bonding company denies coverage or is or becomes insolvent; or
 - iii. That, with respect to damages for bodily injury only, is as hit-and-run vehicle whose operator or owner cannot be indentified and that hits, or causes an accident resulting in bodily injury without hitting:
 1. An individual Named Insured or any family member;
 2. A vehicle that the Named Insured or any family member, if the Named Insured is an individual, and occupying; or
 3. a covered auto.

However, uninsured motor vehicle does not include any vehicle:

- i. Owned by or furnished or available for the regular use of the Named Insured or any family member, if the Named Insured is an individual;
- ii. Owned or operated by a self –insured under any applicable motor vehicle law, except a self-insurer who is or becomes insolvent and cannot provide the amounts required by that motor vehicle law;
- iii. Owned by any government unit or agency;
- iv. Insured under a basic automobile insurance policy issued in accordance with New Jersey law or regulation;
- v. Operated on rails or crawler treads;
- vi. Designed for use mainly off public roads while not on public roads;
- vii. Whiled located for use as a residence or premises.

CUMBERLAND COUNTY INSURANCE COMMISSION					
2017 PROPOSED BUDGET					
		ANNUALIZED BUDGET FY2016	PROPOSED BUDGET	Change \$	Change %
APPROPRIATIONS					
I. Claims and Excess Insurance					
Claims					
1	Property	99,370	101,000	1,630	1.64%
2	Liability	278,302	284,000	5,698	2.05%
3	Auto	48,125	49,000	875	1.82%
4	Workers' Comp.	947,787	967,000	19,213	2.03%
5					
6	Subtotal - Claims	1,373,584	1,401,000	27,416	2.00%
7					
Premiums					
9	CEL JIF	734,742	730,155	(4,587)	-0.62%
10					
11	SubTotal Premiums	734,742	730,155	(4,587)	-0.62%
12	Total Loss Fund	2,108,326	2,131,155	22,829	1.08%
13					
II. Expenses, Fees & Contingency					
15					
16	Claims Adjustment	100,753	102,768	2,015	2.00%
17	Safety Director	0	0	0	0.00%
18	General Expense				
19	Exec. Director	92,683	94,537	1,854	2.00%
20	Actuary	8,346	8,513	167	2.00%
21	Auditor	6,234	6,358	125	2.00%
22	Attorney	6,110	6,232	122	2.00%
23	Treasurer	2,752	2,807	55	2.00%
24	Secretary	2,122	2,165	42	2.00%
25					
26	Misc. Expense & Contingency	20,645	20,645	0	0.00%
27					
28	Total Fund Exp & Contingency	239,645	244,025	4,380	1.83%
29	Risk Managers	147,117	147,117	0	0.00%
30					
31					
32	XS JIF Ancilliary Coverage				
33	POL/EPL	137,492	137,492	0	0.00%
34	XS POL/EPL	0	0	0	0.00%
35	Excess Liability	155,433	155,433	0	0.00%
36	Crime Program	12,413	12,413	0	0.00%
37	Medical Malpractice	28,845	28,845	0	0.00%
38	Pollution Liabilty	6,910	6,910	0	0.00%
39	Employed Lawyers Liab	3,148	3,148	0	0.00%
40	Cyber Liability/Special Coverages	24,780	24,780	0	0.00%
41	Aviation	2,033	2,033	(0)	-0.02%
42					
43	Total FUND Disbursements	2,866,142	2,893,351	27,209	0.95%

CUMBERLAND COUNTY INSURANCE COMMISSION								
2017 PROPOSED ASSESSMENTS -								
	Assessments by Line							
Member Name	Property	Liability	Auto	Workers' Comp.	NJC	E&C	RMC	Total
Cumberland County	53,980	259,137	30,484	793,328	914,531	198,029	117,000	2,366,490
Cumberland County Improvement Authority	45,958	21,531	15,856	168,142	120,078	43,804	25,000	440,368
Cumberland County Utility Authority	1,062	3,332	2,660	5,530	66,600	2,192	5,117	86,493
Grand Totals:	101,000.00	284,000.00	49,000.00	967,000.00	1,101,209.01	244,024.76	147,117.00	2,893,350.77

RESOLUTION NO. 12-17

**RESOLUTION AUTHORIZING AND ADOPTING THE 2017 BUDGET
FOR THE CUMBERLAND COUNTY INSURANCE COMMISSION AND
CERTIFYING MEMBER ASSESSMENTS**

WHEREAS, the CUMBERLAND COUNTY INSURANCE COMMISSION is required under State regulation to adopt an annual budget in accordance with the Fiscal Affairs Law; and

NOW THEREFORE BE IT RESOLVED the appropriations in the total amount of **\$2,893,351** is hereby authorized & approved and assessments for member entities are certified.

ADOPTED by the CUMBERLAND COUNTY INSURANCE COMMISSION at a properly noticed meeting held on February 2, 2017.

ADOPTED:

BY: _____
CHAIRMAN

ATTEST:

VICE CHAIRMAN

CUMBERLAND COUNTY INSURANCE COMMISSION				
FINANCIAL FAST TRACK REPORT				
		AS OF	October 31, 2016	
ALL YEARS COMBINED				
	THIS MONTH	YTD CHANGE	PRIOR YEAR END	FUND BALANCE
1. UNDERWRITING INCOME	238,262	2,388,018	8,686,462	11,074,480
2. CLAIM EXPENSES				
Paid Claims	111,539	953,042	1,612,912	2,565,953
Case Reserves	131,507	337,976	779,342	1,117,317
IBNR	51,051	292,233	573,221	865,455
Discounted Claim Value	(2,637)	(11,676)	(36,309)	(47,985)
TOTAL CLAIMS	291,459	1,571,575	2,929,166	4,500,740
3. EXPENSES				
Excess Premiums	91,566	922,807	3,231,313	4,154,120
Administrative	30,428	302,310	999,370	1,301,680
TOTAL EXPENSES	121,995	1,225,117	4,230,683	5,455,800
4. UNDERWRITING PROFIT (1-2-3)	(175,192)	(408,673)	1,526,613	1,117,940
5. INVESTMENT INCOME	1,201	10,552	12,288	22,841
6. PROFIT (4 + 5)	(173,991)	(398,121)	1,538,901	1,140,781
7. CEL APPROPRIATION CANCELLATION	0	0	2,109	2,109
8. DIVIDEND INCOME	0	0	0	0
9. DIVIDEND EXPENSE	0	0	0	0
10. INVESTMENT IN JOINT VENTURE	(649)	61,193	181,026	242,219
11. SURPLUS (6 + 7 + 8)	(174,640)	(336,927)	1,722,036	1,385,109
SURPLUS (DEFICITS) BY FUND YEAR				
2012	417	14,533	265,939	280,472
2013	1,312	(222,117)	557,629	335,512
2014	(70,063)	(53,220)	380,131	326,911
2015	(9)	(279,778)	518,337	238,559
2016	(106,296)	203,656		203,656
TOTAL SURPLUS (DEFICITS)	(174,640)	(336,927)	1,722,036	1,385,109
TOTAL CASH				
				3,393,010
CLAIM ANALYSIS BY FUND YEAR				
FUND YEAR 2012				
Paid Claims	0	3,665	37,079	40,744
Case Reserves	0	(6,181)	6,181	0
IBNR	0	(7,740)	7,740	0
Discounted Claim Value	0	386	(386)	0
TOTAL FY 2012 CLAIMS	0	(9,870)	50,615	40,744
FUND YEAR 2013				
Paid Claims	2,462	429,085	530,130	959,215
Case Reserves	(1,394)	(157,527)	248,900	91,373
IBNR	(1,013)	(57,785)	90,547	32,762
Discounted Claim Value	75	6,723	(9,825)	(3,103)
TOTAL FY 2013 CLAIMS	130	220,496	859,751	1,080,247
FUND YEAR 2014				
Paid Claims	(9,072)	76,599	782,316	858,915
Case Reserves	79,066	128,047	121,666	249,713
IBNR	(530)	(127,496)	179,916	52,420
Discounted Claim Value	(1,704)	1,287	(7,866)	(6,580)
TOTAL FY 2014 CLAIMS	67,761	78,437	1,076,031	1,154,468
FUND YEAR 2015				
Paid Claims	18,519	170,209	263,387	433,596
Case Reserves	(19,316)	152,842	402,595	555,437
IBNR	508	(40,332)	295,018	254,686
Discounted Claim Value	461	(2,430)	(18,232)	(20,662)
TOTAL FY 2015 CLAIMS	173	280,289	942,768	1,223,057
FUND YEAR 2016				
Paid Claims	99,629	273,483		273,483
Case Reserves	73,150	220,795		220,795
IBNR	52,085	525,586		525,586
Discounted Claim Value	(1,469)	(17,641)		(17,641)
TOTAL FY 2016 CLAIMS	223,395	1,002,223	0	1,002,223
COMBINED TOTAL CLAIMS	291,459	1,571,575	2,929,166	4,500,740

CUMBERLAND COUNTY INSURANCE COMMISSION				
FINANCIAL FAST TRACK REPORT				
AS OF November 30, 2016				
ALL YEARS COMBINED				
	THIS MONTH	YTD CHANGE	PRIOR YEAR END	FUND BALANCE
1. UNDERWRITING INCOME	238,802	2,626,820	8,686,462	11,313,282
2. CLAIM EXPENSES				
Paid Claims	157,708	1,110,750	1,612,912	2,723,661
Case Reserves	(76,193)	261,783	779,342	1,041,125
IBNR	74,426	366,660	573,221	939,881
Discounted Claim Value	(3,002)	(14,678)	(36,309)	(50,987)
TOTAL CLAIMS	152,940	1,724,514	2,929,166	4,653,680
3. EXPENSES				
Excess Premiums	90,362	1,013,169	3,231,313	4,244,482
Administrative	(17,640)	284,669	999,370	1,284,039
TOTAL EXPENSES	72,721	1,297,838	4,230,683	5,528,521
4. UNDERWRITING PROFIT (1-2-3)	13,141	(395,533)	1,526,613	1,131,081
5. INVESTMENT INCOME	1,094	11,646	12,288	23,934
6. PROFIT (4 + 5)	14,234	(383,887)	1,538,901	1,155,015
7. CEL APPROPRIATION CANCELLATION	0	0	2,109	2,109
8. DIVIDEND INCOME	0	0	0	0
9. DIVIDEND EXPENSE	0	0	0	0
10. INVESTMENT IN JOINT VENTURE	11,280	72,474	181,026	253,500
11. SURPLUS (6 + 7 + 8)	25,514	(311,413)	1,722,036	1,410,624
SURPLUS (DEFICITS) BY FUND YEAR				
2012	(264)	14,269	265,939	280,207
2013	(2,226)	(224,343)	557,629	333,286
2014	(2,944)	(56,164)	380,131	323,967
2015	4,825	(274,953)	518,337	243,384
2016	26,123	229,779		229,779
TOTAL SURPLUS (DEFICITS)	25,514	(311,413)	1,722,036	1,410,623
TOTAL CASH				
				3,236,395
CLAIM ANALYSIS BY FUND YEAR				
FUND YEAR 2012				
Paid Claims	0	3,665	37,079	40,744
Case Reserves	0	(6,181)	6,181	0
IBNR	0	(7,740)	7,740	0
Discounted Claim Value	0	386	(386)	0
TOTAL FY 2012 CLAIMS	0	(9,870)	50,615	40,744
FUND YEAR 2013				
Paid Claims	0	429,085	530,130	959,215
Case Reserves	0	(157,527)	248,900	91,373
IBNR	1,013	(56,772)	90,547	33,775
Discounted Claim Value	0	6,723	(9,825)	(3,103)
TOTAL FY 2013 CLAIMS	1,013	221,509	859,751	1,081,261
FUND YEAR 2014				
Paid Claims	11,858	88,457	782,316	870,773
Case Reserves	(5,916)	122,130	121,666	243,796
IBNR	(65)	(127,561)	179,916	52,355
Discounted Claim Value	0	1,287	(7,866)	(6,580)
TOTAL FY 2014 CLAIMS	5,876	84,313	1,076,031	1,160,344
FUND YEAR 2015				
Paid Claims	33,472	203,681	263,387	467,067
Case Reserves	10,135	162,978	402,595	565,573
IBNR	(43,319)	(83,651)	295,018	211,367
Discounted Claim Value	0	(2,430)	(18,232)	(20,662)
TOTAL FY 2015 CLAIMS	288	280,577	942,768	1,223,345
FUND YEAR 2016				
Paid Claims	112,379	385,862		385,862
Case Reserves	(80,412)	140,383		140,383
IBNR	116,797	642,383		642,383
Discounted Claim Value	(3,002)	(20,643)		(20,643)
TOTAL FY 2016 CLAIMS	145,763	1,147,986	0	1,147,986
COMBINED TOTAL CLAIMS	152,940	1,724,514	2,929,166	4,653,680

NEW JERSEY COUNTIES EXCESS JIF					
FINANCIAL FAST TRACK REPORT					
AS OF November 30, 2016					
ALL YEARS COMBINED					
	THIS	YTD	PRIOR	FUND	
	MONTH	CHANGE	YEAR END	BALANCE	
1.	UNDERWRITING INCOME	1,774,241	19,506,655	76,187,004	95,693,659
2.	CLAIM EXPENSES				
	Paid Claims	164,790	1,619,726	1,089,974	2,709,700
	Case Reserves	74,183	218,521	2,413,317	2,631,837
	IBNR	(133,668)	490,540	9,188,910	9,679,450
	Discounted Claim Value	(8,363)	(87,549)	(651,074)	(738,622)
	TOTAL CLAIMS	96,943	2,241,237	12,041,128	14,282,365
3.	EXPENSES				
	Excess Premiums	1,256,275	13,816,041	52,056,606	65,872,648
	Administrative	109,526	1,410,559	5,652,271	7,062,830
	TOTAL EXPENSES	1,365,801	15,226,600	57,708,877	72,935,478
4.	UNDERWRITING PROFIT (1-2-3)	311,498	2,038,817	6,436,999	8,475,816
5.	INVESTMENT INCOME	4,142	40,266	184,725	224,991
6.	PROFIT (4+5)	315,639	2,079,084	6,621,724	8,700,807
7.	Dividend	150,000	150,000	150,000	300,000
8.	Cancelled Appropriations	0	0	607,551	607,551
9.	SURPLUS (6-7-8)	165,639	1,929,084	5,864,173	7,793,256
SURPLUS (DEFICITS) BY FUND YEAR					
	2010	(83,512)	(39,547)	642,182	602,635
	2011	(62,975)	(251,951)	1,149,228	897,276
	2012	(25,736)	263,332	477,778	741,111
	2013	(22,709)	(83,104)	1,259,797	1,176,692
	2014	60,333	566,506	1,417,746	1,984,252
	2015	26,048	(95,498)	917,441	821,943
	2016	274,190	1,569,346		1,569,346
	TOTAL SURPLUS (DEFICITS)	165,639	1,929,084	5,864,172	7,793,255
	TOTAL CASH				19,997,092
CLAIM ANALYSIS BY FUND YEAR					
FUND YEAR 2010					
	Paid Claims	0	901	163,454	164,355
	Case Reserves	0	(0)	1	1
	IBNR	8,719	(35,901)	326,545	290,644
	Discounted Claim Value	0	1,841	(11,008)	(9,167)
	TOTAL FY 2010 CLAIMS	8,719	(33,159)	478,992	445,832
FUND YEAR 2011					
	Paid Claims	157,151	248,385	144,097	392,482
	Case Reserves	(157,151)	145,550	262,007	407,557
	IBNR	(11,650)	(203,935)	623,896	419,961
	Discounted Claim Value	0	(8,954)	(41,637)	(50,591)
	TOTAL FY 2011 CLAIMS	(11,650)	181,046	988,363	1,169,409
FUND YEAR 2012					
	Paid Claims	3,650	613,709	515,889	1,129,597
	Case Reserves	222,751	(422,433)	856,270	433,837
	IBNR	(200,276)	(475,619)	1,120,043	644,424
	Discounted Claim Value	0	25,403	(82,267)	(56,865)
	TOTAL FY 2012 CLAIMS	26,125	(258,941)	2,409,934	2,150,994
FUND YEAR 2013					
	Paid Claims	0	500,452	15,975	516,427
	Case Reserves	0	112,427	511,304	623,730
	IBNR	23,277	(542,878)	1,657,721	1,114,843
	Discounted Claim Value	0	19,898	(110,993)	(91,095)
	TOTAL FY 2013 CLAIMS	23,277	89,898	2,074,007	2,163,905
FUND YEAR 2014					
	Paid Claims	3,926	144,097	120,096	264,193
	Case Reserves	8,637	(167,460)	313,106	145,646
	IBNR	(72,142)	(586,638)	2,411,798	1,825,160
	Discounted Claim Value	0	51,879	(164,745)	(112,866)
	TOTAL FY 2014 CLAIMS	(59,579)	(558,121)	2,680,255	2,122,134
FUND YEAR 2015					
	Paid Claims	62	112,182	130,464	242,646
	Case Reserves	(60)	550,367	470,629	1,020,997
	IBNR	(4,995)	(552,549)	3,048,907	2,496,358
	Discounted Claim Value	0	18,105	(240,424)	(222,319)
	TOTAL FY 2015 CLAIMS	(4,993)	128,105	3,409,576	3,537,681
FUND YEAR 2016					
	Paid Claims	0	0		0
	Case Reserves	7	70		70
	IBNR	123,399	2,888,060		2,888,060
	Discounted Claim Value	(8,363)	(195,720)		(195,720)
	TOTAL FY 2016 CLAIMS	115,043	2,692,410	0	2,692,410
	COMBINED TOTAL CLAIMS	96,943	2,241,237	12,041,128	14,282,365

Cumberland County Insurance Commission
Claims Committee
2017 Meeting Schedule

All meetings will be held in the Freeholder Conference Room
164 W. Broad Street, Bridgeton NJ
at 11:00AM OR via Conference Call

January 17, 2017

February 21, 2017

March 21, 2017

April 18, 2017

May 16, 2017

June 20, 2017

July 18, 2017

August 15, 2017

September 19, 2017

October 17, 2017

November 21, 2017

December 19, 2017

CUMBERLAND COUNTY INSURANCE COMMISSION CLAIMS COMMITTEE MEETING SCHEDULE, ASSIGNMENTS AND CLAIMS CHARTER

The Claims Committee will conduct meetings on the following schedule:

Claims Committee Meetings will be held on the third Tuesday of each month at 11 am at the County Administration Building, 164 W. Broad Street, Bridgeton, NJ 08302.

2017 CLAIMS COMMITTEE ASSIGNMENTS

Committee Members

Name

Ken Mecouch (Chair)
Craig Atkinson/Henrietta Barreras
Jerry Velaquez/Janet Heck
Steven Errickson

Affiliation

Cumberland County Insurance Commission
Cumberland County
Cumberland County Improvement Authority
Cumberland County Utilities Authority

Fund Professionals

Theodore Baker
Bradford Stokes
Joe Porch
Bonnie Ridolfino
Danielle Batchelor
Glenn Prince
Keith Platt
Veronica George
Matt Baron

Commission Counsel
PERMA
PERMA
Hardenbergh Insurance Group
Conner Strong & Buckelew
J.A. Montgomery
Inservco Insurance Services
Inservco Insurance Services
Inservco Insurance Services

January 2014 Edition
Amended April 3, 2014
Amended February 3, 2015
Amended February 4, 2016

CUMBERLAND COUNTY INSURANCE COMMISSION CLAIMS COMMITTEE MEETING SCHEDULE, ASSIGNMENTS AND CLAIMS CHARTER

CLAIMS COMMITTEE CHARTER

The Cumberland County Insurance Commission hereby constitutes and establishes a Claims Committee, an advisory committee authorized by the Commission's rules and regulations:

Composition

The Claims Committee shall be comprised of at least one representative from each member of the Cumberland County Insurance Commission and one Cumberland County Insurance Commissioner. Each representative shall have one vote. As additional members join the Cumberland County Insurance Commission, a representative from the new member entity shall be appointed to the Claims Committee.

Also serving on the Committee, with no voting privileges, shall be a representative from the Executive Director's office, the Fund Attorney, a representative from the County's Risk Management Consultant's office, a representative from the Third Party Administrator's office, and a representative from the CEL's Safety Director's office.

Authority and Responsibility

1. The Claims Committee shall review and recommend for approval or denial all payment authority requests which are subject to any combination of payments that exceed seven thousand five hundred dollars (\$7,500) for Property, including Boiler & Machinery, Auto Liability, General Liability including Law Enforcement Legal Liability, and fifteen thousand dollars (\$15,000) for Workers' Compensation Claims, inclusive of legal fees, expenses, and such other items to be charged to the Cumberland County Insurance Commission. This notification also includes any prior claim where a request for additional payment authority is needed beyond an amount previously approved, any requests for lien compromises, and any subrogation abandonment requests.
2. The Claims Committee shall develop and recommend claims cost containment programs.

Claims Committee Bylaws

The Claims Committee of the Cumberland County Insurance Commission was established in February 2013, where the Cumberland County Insurance Commission adopted a resolution appointing certain employees of member entities to the Claims Committee, an advisory committee authorized by the Commission's rules and

CUMBERLAND COUNTY INSURANCE COMMISSION CLAIMS COMMITTEE MEETING SCHEDULE, ASSIGNMENTS AND CLAIMS CHARTER

regulations. The Committee's operational guidelines are set down herein and may be amended by the Commissioners of the Cumberland County Insurance Commission.

Meetings

The Claims Committee shall meet at least monthly, on the third Tuesday of the month, and as many times as the Committee Chairman deems necessary; provided, however, if there are five or less payment authority requests to review in one month, the Claims Committee may conduct the review of the payment authority requests electronically or telephonically in lieu of an in-person meeting.

Attendance

A majority of members of the Claims Committee shall be present at all meetings. In addition, a representative from the Executive Director's office, the Fund Attorney, a representative from the Risk Management Consultant's office, a representative from the Third Party Administrator's Office, and a representative from the CEL's Safety Director's office shall attend such meetings. As necessary or desirable, the Chairman may request other professionals and/or member representatives to also attend in order to exchange views on any issue that may be at hand.

Specific Duties

In undertaking its responsibilities as outlined above, the Claims Committee is to:

1. Apprise the Commissioners of the Cumberland County Insurance Commission, through special presentations as necessary, of significant developments in the course of performing its responsibility.
2. Review and recommend for approval or denial all payment authority requests which are subject to any combination of payments that exceeds seven thousand five hundred dollars (\$7,500) for Property, including Boiler & Machinery, Auto Liability, General Liability including Law Enforcement Legal Liability, and ten thousand dollars (\$15,000) for Workers' Compensation inclusive of legal fees, expenses, and such other items to be charged to the Cumberland County Insurance Commission. This notification also includes any prior claim where a request for additional payment authority is needed beyond an amount previously approved, any requests for lien compromises, and any subrogation abandonment requests.

**CUMBERLAND COUNTY INSURANCE COMMISSION
CLAIMS COMMITTEE MEETING SCHEDULE,
ASSIGNMENTS AND CLAIMS CHARTER**

3. Recommend to Commissioners of the Cumberland County Insurance Commission any appropriated changes or extensions in the duties of the Committee.
4. Report annually to the Commissioners of the Cumberland County Insurance Commission on the discharge of these responsibilities.

RESOLUTION NO. 13 – 17

**CUMBERLAND COUNTY INSURANCE COMMISSION
BILLS LIST – FEBRUARY 2017**

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

BE IT RESOLVED that the Cumberland County Insurance Fund Commission, hereby authorizes the Commission 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 Commission.

FUND YEAR 2016

<u>CheckNumber</u>	<u>VendorName</u>	<u>Comment</u>	<u>InvoiceAmount</u>
000100			
000100	INSERVCO INSURANCE SERVICES	CLAIMS ADMIN FEE 12/2016	4,216.66
			4,216.66
000101			
000101	PERMA RISK MANAGEMENT SERVICES	POSTAGE FEE 11/2016	1.57
000101	PERMA RISK MANAGEMENT SERVICES	1099 FILING - 2016	14.95
000101	PERMA RISK MANAGEMENT SERVICES	POSTAGE FEE 10/2016	2.20
			18.72
000102			
000102	SAFETYFIRST SYSTEMS	DECALS - ADD'L POWERED VEHICLES 12/9/16	23.95
			23.95
		TOTAL PAYMENTS FY 2016	4,259.33

FUND YEAR 2017

<u>CheckNumber</u>	<u>VendorName</u>	<u>Comment</u>	<u>InvoiceAmount</u>
000103			
000103	INSERVCO INSURANCE SERVICES	CLAIMS ADMIN FEE 01/2017	4,216.66
			4,216.66
000104			
000104	PERMA RISK MANAGEMENT SERVICES	EXECUTIVE DIRECTOR FEE 1ST QTR 2017	23,634.25
			23,634.25
000105			
000105	THE ACTUARIAL ADVANTAGE	ACTUARIAL CONSULTING FEE 1ST QTR 2017	2,128.00
			2,128.00
000106			
000106	HARDENBERGH INSURANCE GROUP	RMC FEE 1ST QTR 2017 - CUUA	1,279.25
000106	HARDENBERGH INSURANCE GROUP	RMC FEE 1ST QTR 2017 - CUIA	6,250.00
000106	HARDENBERGH INSURANCE GROUP	RMC FEE 1ST QTR 2017 - CUMBERLAND COUNTY	29,250.00
			36,779.25
		TOTAL PAYMENTS FY 2017	66,758.16

TOTAL PAYMENTS ALL FUND YEARS \$ 71,017.49

Chairperson

Attest:

Dated: _____

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

Treasurer

**CUMBERLAND COUNTY INSURANCE COMMISSION
SAFETY DIRECTOR'S REPORT**

TO: Fund Commissioners
FROM: J.A. Montgomery Risk Control, Safety Director
DATE: January 23, 2017

December – February 2017

David McHale, Public Sector Director dmchale@jamontgomery.com Office: 732-736-5213 Cell: 732-673-4802	Glenn Prince, Associate Public Sector Director gprince@jamontgomery.com Office: 856-552-4744 Cell: 609-238-3949	Natalie Dougherty, Executive Assistant ndougherty@jamontgomery.com Office: 856-552-4738
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RISK CONTROL ACTIVITIES

MEETINGS ATTENDED / LOSS CONTROL VISITS AND TRAINING CONDUCTED

- **December 1:** Attended the CUIC meeting in Bridgeton.
- **December 13:** Attended the CUIC Safety Committee meeting in Bridgeton.
- **December 20:** Attended the CUIC Claims Committee meeting via conference call.
- **January 17:** Attended the CUIC Claims Committee meeting via conference call.

UPCOMING MEETINGS / LOSS CONTROL VISITS PLANNED

- **February 2:** Plan to attend the CUIC meeting in Bridgeton.
- **February 14:** Plan to attend the CUIC Safety Committee meeting in Bridgeton.
- **February 17:** One session of Supervisors Reasonable Suspicion training is scheduled for CUIC-CUIA.

- **February 21:** Plan to attend the CUIC Claims Committee meeting via conference call.

CEL VIDEO LIBRARY USAGE

- Eight videos were utilized in 2016.

SAFETY DIRECTOR BULLETINS

- Best Practices for Snow Emergencies – January 11.
- PEOSH Reporting & Recording – January 23.

Best Practices for Snow Emergencies

The following guidelines are offered as suggestions when planning for emergency operations presented by winter storms. Every storm event is different and needs and resources will vary. This document offers best practices that have been identified by our members regarding hours of operation, rest breaks, and rotating schedules for before, during and after snow events.

Emergency planners are also encouraged to refer to federal and state CDL driving limitations, and other standards or regulations that may apply.

Pre-planning issues

- **Chain of command**
 - Identify who will hold command staff positions. Plan for at least two persons for each command staff position to man the command center around the clock for the first day or two for major snow events.
 - Develop a written snow plan with defined roles and hierarchy.
 - Verify emergency contact information.
- **Staffing**
 - Supplement crews with back ups, including contractors, utilities, fire department and per diem drivers
 - Consider developing a list of retired CDL drivers you might call upon.
 - Consider areas that may require the use of contractors with specialized equipment i.e. cul-de-sacs.
 - Consider having departments clear their own lots if possible; i.e. fire departments and utilities.
- **Shift work planning**
 - Remind workers of need to prepare their homes and families for their absence during the emergency.
- **Plan for rest breaks / sleeping accommodations**
 - Entities may need to encourage drivers to stay at local facilities. Provide sleeping arrangements at fire and EMS stations, or senior centers.
 - Ensure quiet time at these locations.
 - Plan for possible power interruptions at these locations.
- **Plan for Health and Welfare**
 - Consider needs for food and hydration.
 - Educate workers on appropriate winter and protective apparel.
 - Remind workers to pack personal items such as medications, special dietary needs, etc.
 - Remind supervisors and employees that employees on transitional duty may not work beyond their medical restrictions.

Operations during storm

- **Establish priority routes and areas**
 - Clear parking lots and access routes of emergency response agencies (i.e. police, fire, and EMS) first
 - Consider providing sand / salt to use until clearing occurs at facilities

This bulletin is intended for general information purposes only. It should not be construed as legal advice or legal opinion regarding any specific or factual situation. Always follow your organization's policies and procedures as presented by your manager or supervisor. For further information regarding this bulletin, contact your Safety Director at 877.398.3046.

- **Communication plans / telephone or radio contact**
 - Establish who will operate as Base (part of incident command structure)
 - Determine who takes calls from residents, both emergency and non-emergency (complaints)
 - Establish liaison with towns or agencies, news agencies, etc.
 - Ensure operators remain in constant contact with base
 - Establish procedures for reporting and responding to accidents / incidents
- **Deteriorating Storm Conditions “When to temporarily halt operations”**
 - Who will make the final call
 - Include the criteria for “temporary halting of operations” in plan, i.e., discontinuing operations until conditions improve, with consultation of major stakeholders,
 - Encourage all who are in the field to report status of conditions for the safety of the entire crew
- **Rest breaks / Fatigue**
 - Inform drivers that they have the personal responsibility to pull themselves from driving if they feel overly fatigued or diminished. Have a procedure on how the driver will report to a supervisor and how to address the situation within employment agreements.
- **Rotations**
 - Incorporate travel distance to work into shift planning. Those who live farthest, home after 12 hours to sleep and return for next shift.

Post-Storm Operations

- **Return to normal operations**
 - As conditions normalize, transition back to normal 8-hour shifts
 - Consider the impact of fatigue from the extended shifts when transitioning back to normal operations.
 - Inspect, repair and perform routine maintenance on equipment
- **Conduct after-incident debriefing**
 - Review with all stakeholders what worked and what challenges were encountered
 - Update Snow Emergency Plan with lessons learned from the event

Liability issues – Recommendations to limit liability

- Maintain a record of weather conditions
- Document actions taken, date, time, crews, equipment employed, and materials (salt etc.) used
- Record *all* complaints with date and time received
- Document specific actions taken and time of action in response to complaints
- Take photographs to record weather conditions and incidents
- Preserve newspaper articles on storm severity and clean up activities
- Work with police to have their accident reports supplemented with photographs showing conditions

Snow events are difficult. Proper planning and training can ease the strain on employees, managers, and the community.

NJPEOSH Recording and Reporting of Occupational Injuries and Illnesses

February 1st is the deadline to tabulate the Log of Work-Related Injuries and Illnesses (NJOSH-300). The Summary Log (NJOSH-300A) must be posted in a visible area for each establishment, where notices to employees are posted, from February 1 to April 30 of each year.

New Jersey requires all public employers to *record* occupational injuries and illnesses. In addition, certain serious injuries must be *reported* directly to New Jersey PEOSH within specified timeframes. The complete rules for recording and reporting injuries can be accessed at <http://nj.gov/health/peosh/record.shtml>

Recording of Occupational Injuries

There are two important forms for the recording of injuries. The *Log of Work-Related Injuries and Illnesses (NJOSH-300)* is a listing of work-related injuries and illness that is maintained throughout the year. Injuries and illnesses are entered into the *Log* within 7 days of being notified of the injury / illness. Five years of *NJOSH-300 Logs* must be readily available to NJPEOSH inspectors. The second form is the annual summary of work-related injuries, *NJOSH 300A Summary of Work-Related Injuries and Illnesses*. This summary is posted at each work establishment from February through April.

'Work-related' is defined as any event or exposure in the work environment either causing or contributing to the resulting condition, or significantly aggravating a pre-existing injury or illness. 'Work-related' is presumed for injuries and illnesses resulting from events occurring in the work environment, unless an exception given in OSHA 1904.5(b)(2) applies. Recordable work-related injuries and illnesses are those that result in:

- Death or loss of consciousness
- Days away from work, placement on restricted work activity, or a job transfer
- Medical treatment beyond first aid

Public employers must also record the following conditions if they have been determined to be work-related:

- Any needle stick injury or cut from an object that is contaminated with a potentially infectious material
- Any case requiring an employee to be medically removed under an OSHA health (chemical) standard
- A tuberculosis infection as evidenced by a positive skin test or diagnosis by a physician
- An employee's audiogram reveals a specified hearing Standard Threshold Shift in one or both ears

Reporting of Serious Occupational Injuries to NJPEOSH

New Jersey Public Employers must report fatalities to NJPEOSH **within eight (8) hours** of the occurrence, and report work-related hospitalizations, amputations, or loss of an eye **within 24 hours** by calling the 24-hour hotline (800) 624-1644 or the 24-hour fax line (609) 292-3749. Refer to the flow chart on page 2.

Links to additional resources

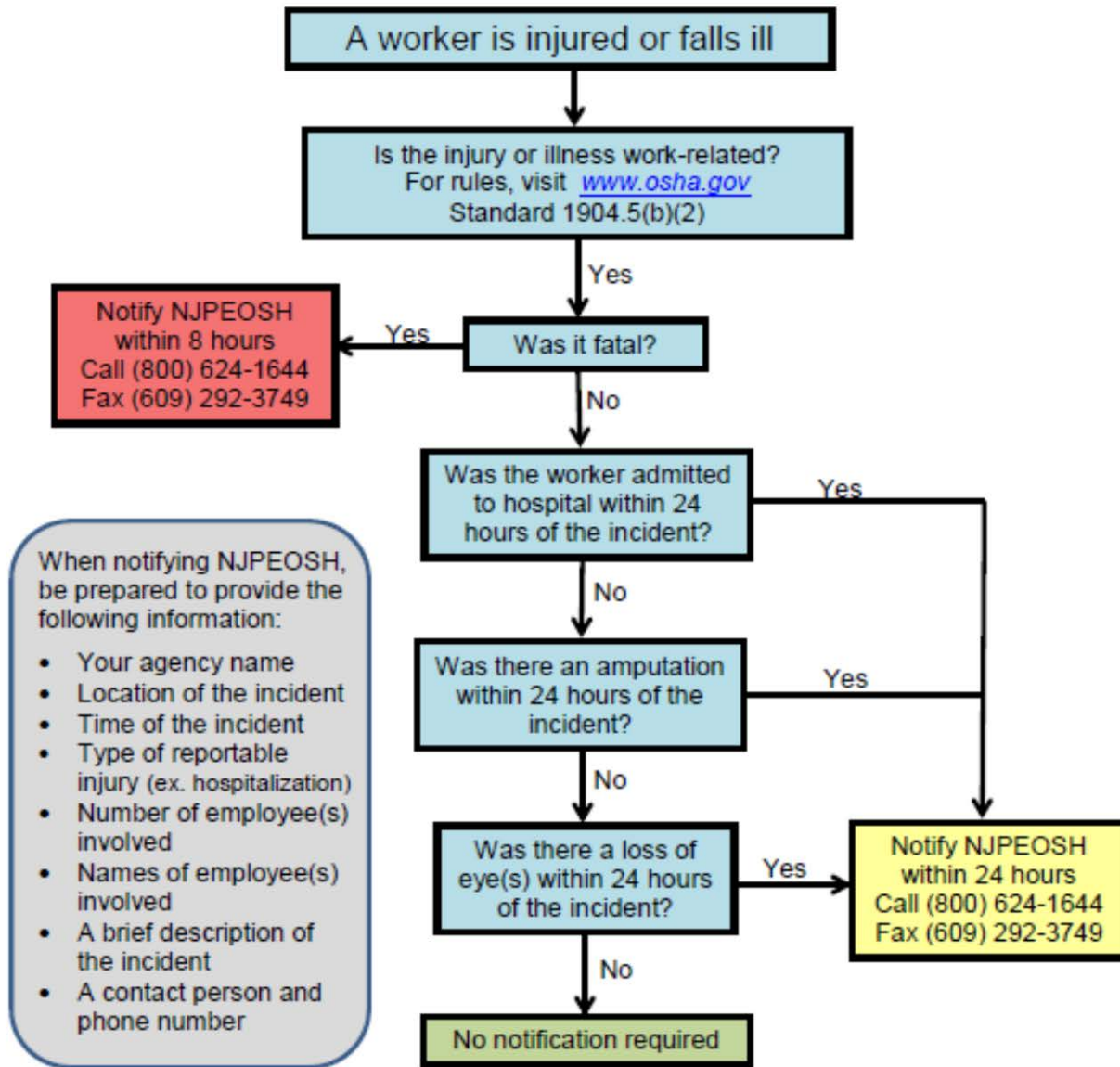
NJPEOSH 16-page guide to Recording and Reporting of Occupational Injuries and Illnesses is available at http://lwd.dol.state.nj.us/labor/forms_pdfs/lsse/NJOSH300.pdf

NPEOSH revised their Public Employee Alert #27 to reflect the new reporting regulations. It is available at http://lwd.dol.state.nj.us/labor/forms_pdfs/lsse/Alert27.pdf.

Now is also a good time to verify the PEOSH poster is posted. A copy can be downloaded at http://lwd.dol.state.nj.us/labor/forms_pdfs/lsse/wps35.pdf

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NJPEOSH 2015 Injury Reporting Requirements



Notes:

- OSHA defines amputation as the traumatic loss of a limb or external body part, including a part, such as a limb or appendage, that has been severed, cut off (either completely or partially); fingertip amputations with or without bone loss; medical amputations resulting from irreparable damage; amputations of parts that have been reattached. Amputations do not include avulsions, enucleations, degloving, scalping, severed ears, or broken or chipped teeth.
- If a motor vehicle accident occurs in a construction work zone, you must report the fatality, in-patient hospitalization, amputation, or loss of an eye. If the motor vehicle accident occurred on a public street or highway, but not in a construction work zone, you do not have to report the fatality, hospitalization, amputation, or loss of an eye.
- A work-related fatality or in-patient hospitalization caused by a heart attack must be reported



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TO: Commissioners of the Cumberland County Insurance Commission (CCIC)
CC: Joseph Porch and Brad Stokes, CumbCIC Executive Director
FROM: Christopher Powell and Bonnie Ridolfino, Risk Management Consultant
DATE: 1/30/17
RE: Risk Management Consultant's Report

Safety and Training

- Attached is the approved 10/11/16 Safety and Accident Review Committee Meeting Minutes. The 12/13/16 Meeting Minutes will be included in the next agenda packet contingent upon their approval.
- **Resolution recognizing the members' safety effort for Commission Year 2016**
We are currently reviewing the claims experience valued as of 12/31/16 and anticipate presenting resolutions recognizing members' safety effort throughout 2016 to the Commissioners for approval at the 4/11/17 meeting.
- **GCIC - Hardenbergh Insurance Group Service Team**
Joe Henry will be assisting Christina with the safety effort of the Commission. He has been the Public Entity Department's safety representative for 7 years.

Risk Management

- **2017 Risk Management Plan – INFORMATIONAL PURPOSES ONLY**
Per the Executive Director's Report, there are 2 changes to the 2017 Risk Management Plan:
 - 1) Deductible for Vacant Buildings will be \$250,000 in lieu of the member's deductible.
This effects the following locations:
County – 72 N. Pearl Street, Bridgeton - \$764,000
County – 19 Landis Avenue, Bridgeton - \$630,000
IA – 14 N. Pearl Street, Bridgeton - \$250,000
IA – 18-20 N. Pearl Street, Bridgeton - \$50,000
 - 2) The deductible for medical malpractice claims for the County Corrections department has been increased to \$100,000 per claim.
The County Corrections Department has not had nursing staff at the Juvenile Detention Center July 2015, therefore the potential of a claim at this point is minimal. The County as no nursing staff at the Adult Facility.
- **2017 Claims Charter**
Attached is the 2017 Claims Charter. The only amendment is the change to the members.

Action Requested: Motion to adopt the revised Claims Charter.

- **2016 Recoveries on Property Damage Claims (i.e. Auto and Traffic Light) under County's \$5,000 deductible**

The County has recovered a total of \$13,013 all claims recovered 100% of damages; 2 claims remain open.

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CUMBERLAND COUNTY INSURANCE COMMISSION

Safety and Accident Review Committee Meeting Minutes
 October 11, 2016
 10:00 AM
 In-Person and via Teleconference

- I. Call to Order – Craig Atkinson, Chairman
 Mr. Atkinson called the meeting to order at 10:05am.

II. Roll Call

<u>Committee Members:</u>	<u>Member</u>	<u>Present / Absent</u>
Craig Atkinson	Cumberland County Insurance Commission (Chair)	Present
Celeste Riley	Cumberland County - County Clerk's Office	Absent
Barbara Nedohon	Cumberland County - Aging/Administration	Absent
Robin Haaf (L: 10:55am)	Cumberland County - Human Services/Alcohol	Present - Phone
Richard Necells	Cumberland County - Prosecutor/Administration	Absent
Elizabeth Hoffman	Cumberland County – Sheriff's Office	Absent
Megan Sheppard	Cumberland County – Health Department	Absent
Ginger Supernavage	Cumberland County – Dept. of Workforce Development	Absent
Hennietta Barreras	Cumberland County - Human Resources	Present
Edward Conrow	Cumberland County - Emergency Services & Public Protection	Absent
Warden Robert Ballckl	Cumberland County – Corrections Facility	Absent
Theresa VanSant	Cumberland County – CATS	Present
Veronica Surrency	Cumberland County - Juvenile Detention Center	Present
David Dewoody	Cumberland County – Purchasing	Absent
Tammy Commander	Cumberland County – 4 –H Extension	Absent
James Nieher	Cumberland County – Public Works	Absent
Betty Rodriguez	Cumberland County – Dept. of Social Services	Present
Myron Esteile	Cumberland County – Library	Absent
Craig Trull	Cumberland County Improvement Authority	Absent
Steven Erickson	Cumberland County Utilities Authority	Absent

Alternates:

Dawn Bowen	Cumberland County – Emergency Services & Public Protection	Absent
Renee Whilden	Cumberland County – Corrections Facility	Present - Phone
Tara Butler	Cumberland County – Juvenile Detention Center	Present
Sean O'Donnell	Cumberland County – County Clerk's Office	Absent
Noah Hetzell	Cumberland County – Department of Health	Present
Ryan Feaster	Cumberland County – Dept. of Workforce Development	Present
Craig Johnson	Cumberland County – Sheriff's Office	Absent
John Knoop	Cumberland County – County Engineer/Public Works	Absent
Barbara Young	Cumberland County – Public Works	Present
Rich Lupson	Cumberland County – Buildings and Grounds	Absent
Jasmin Calderon (A:10:17am)	Cumberland County – Prosecutor / Administration	Present

Commission Professionals:

Brad Stokes	Executive Director	Absent
Joseph Porch	Executive Director	Absent
Glenn Prince	NJCEL Safety Director / JA Montgomery	Present
Karen Read	PERMA	Absent
Bonnie Riddifino	RMC / Hardenbergh Insurance Group	Present
Christina Violetti	RMC / Hardenbergh Insurance Group	Present – Phone

Mr. Atkinson began by introducing Lauren Clinton. Ms. Clinton is the marketing director for Occupational Health Services for Inspira Medical Center.

- III. Approval of the 8/9/16 Safety and Accident Review Committee Meeting Minutes.
 Ms. Barreras advised the Committee that Item Z is amended to read – the Committee reviewed the Accident Investigation and determined the accident could have been prevented if the employee had removed her coffee cup from the microwave within 30 seconds.

CUMBERLAND COUNTY INSURANCE COMMISSION

She also advised the Committee that Item BB is amended to read – the Committee reviewed the Accident Investigation and determined the accident could have been prevented if the homeowner had put the dogs away prior to the employee delivering the meal.

Motion to approve the 8/9/16 Safety and Accident Review Committee Meeting Minutes as amended.

Moved: Veronica Surrency

Seconded: Theresa VanSant

Vote: Aye: Unanimous Nay: 0 Abstentions: 0

IV. Chairman's Report – Craig Atkinson

The Chairman provided a review of the County's Accident Statistics for the first 9 months of 2016.

Mr. Atkinson advised that the current class at the Corrections Academy graduated all eight of its recruits on August 14th. All of the recruits are currently employed full time at the County Jail. He commented on the improvement of the graduation rate attributing such to the pre-employment screening and the workout conditioning program.

He advised the Committee of the training sessions in which County employees attended: Substance Abuse Training for County supervisors was held on August 19th at the Fire Academy and August 29th for DOSS. Ms. Barreras suggested that this training be conducted every two years. In addition, the Office of Aging and CATS department held a Safety Day on September 23rd.

The Slip and Fall team reported that they have not been notified of any workers' compensation injuries to investigate as a result of a slip and fall. They are putting together an overview and goals of the team.

Mr. Atkinson reported for the Overexertion team. The team has become a wellness program. The Department of Health is involved in a wellness program for the employees of the County. The Administration department had a Lunch and Learn on August 1st to discuss nutrition. The team is working on having similar trainings in anti-smoking and stress management for the Public Works and Aging departments.

Next, Mr. Atkinson provided an update about the new Absence Management committee. The committee is working to change the sick leave policy for the County employees. They are exploring the use of counseling of an employee when multiple sick days are utilized. There was a discussion regarding when disciplinary action is appropriate for using sick days.

V. Risk Management Consultant's Report

Ms. Ridolfino provided the members the accident report for Cumberland County Improvement Authority and Cumberland County Utilities Authority advising that there have been no claims since the previous meeting.

She also commented on the Safety and Accident Committee goals and asked committee members to submit any updates.

Next, she advised that the NJCEL Best Practices Workshop will be held on November 2nd at the Conner Strong office in Marlon. She encouraged the members to attend and will be distributing the agenda once received.

Lastly, she spoke about the closed auto liability claims and highlighted that the one claim is closed with no payment made. This shows that the Commission is doing well.

VI. NJCEL Safety Director's Report

Mr. Prince spoke about commonly cited PEOGH citations and how to utilize the information to receive fewer citations and be compliant.

Mr. Atkinson advised that the County's training website will be live soon. On the website there will be link to New Jersey PEOGH with all their training and safety requirements.

VII. Presentation of Supervisor's Accident Investigation Forms for Review – Chairman Atkinson

The following accident investigation forms were reviewed:

A. Department: Sheriff's Dept. Date of Injury: 8/2/16 Type: Motor vehicle accident
The Committee reviewed the Accident Investigation and determined the accident could not have been prevented but recommended that the proper restraint system is working in the vehicle to prevent injuries.

CUMBERLAND COUNTY INSURANCE COMMISSION

- B. Department: Sheriff's Dept. Date of Injury: 8/15/16 Type: Chest pain while training
The Committee reviewed the Accident Investigation and determined the accident could not have been prevented and no recommendations were made.
- C. Department: Sheriff's Dept. Date of Injury: 8/18/16 Type: Felt sharp pain while running
The Committee reviewed the Accident Investigation and determined the accident could not have been prevented and no recommendations were made.
- D. Department: Roads & Bridges Date of Injury: 8/17/16 Type: Felt pain when hooking up hydraulic lines
The Committee reviewed the Accident Investigation and determined the accident could not have been prevented and no recommendations were made.
- E. Department: Sheriff's Dept. Date of Injury: 8/24/16 Type: Felt sharp pain in right side when training
The Committee reviewed the Accident Investigation and determined the accident could not have been prevented and no recommendations were made.
- F. Department: Health Dept. Date of Injury: 8/27/16 Type: Trip & fall carrying boxes on hand truck
The Committee reviewed the Accident Investigation and determined the accident could have been prevented as the hand truck was overloaded.
- G. Department: Corrections Date of Injury: 8/27/16 Type: Restraining inmate, fell on ground
The Committee reviewed the Accident Investigation and determined the accident could not have been prevented and no recommendations were made.
- H. Department: Aging & Disabled Date of Injury: 9/8/16 Type: Two dogs bit employee's lower leg
The Committee reviewed the Accident Investigation and determined the accident could have been prevented if the homeowner put the dogs away prior to the delivering of the meal.
- I. Department: Dept. Social Services Date of Injury: 9/8/16 Type: Tripped and fell due to uneven pavement
The Committee reviewed the Accident Investigation and determined the accident could have been prevented and the Chairman advised that when this type of accident occurs, the area should be reviewed.
- J. Department: Corrections Date of Injury: 9/13/16 Type: Inmate spit on ear and neck
The Committee reviewed the Accident Investigation and determined the accident could not have been prevented and there was a short discussion regarding spit hoods.
- K. Department: Corrections Date of Injury: 9/15/16 Type: Inmate spit on employee
The Committee reviewed the Accident Investigation and determined the accident could not have been prevented and no recommendations were made.
- L. Department: Corrections Date of Injury: 9/19/16 Type: Felt sharp pain when locking gate
The Committee reviewed the Accident Investigation and determined the accident could have been prevented with the locks having daily maintenance.
- M. Department: Corrections Date of Injury: 9/19/16 Type: Inmate punched chin & twisted knee
The Committee reviewed the Accident Investigation and determined the accident could not have been prevented and no recommendations were made.
- N. Department: Roads & Bridges Date of Injury: 9/20/16 Type: Tripped over hand truck loading calcium
The Committee reviewed the Accident Investigation and determined the accident could have been prevented by being aware of surroundings.
- O. Department: Corrections Date of Injury: 9/16/16 Type: Struggled with inmate injuring knee
The Committee reviewed the Accident Investigation and determined the accident could not have been prevented and no recommendations were made.
- P. Department: Corrections Date of Injury: 9/16/16 Type: Tripped on uneven pavement in lot
The Committee reviewed the Accident Investigation and determined the accident could have been prevented by being careful when walking through the parking lot.

CUMBERLAND COUNTY INSURANCE COMMISSION

Q. Department: Aging & Disabled Date of Injury: 9/29/16 Type: Shoe caught in carpet injuring knee
The Committee reviewed the Accident Investigation and determined the accident could have been prevented by being mindful of the type of shoe worn.

- IX. Old Business
There was no old business.
- X. New Business
There was no new business.
- XI. Adjournment
The meeting was adjourned at 11:05 am.

CCIC - 377
Financial Transaction Log - Liability Claim Payments
Monthly / Detail / By Coverage / By Payment Type / By Check Number
11/01/2016 Thru 11/30/2016

Type	Check #	Claim #	Claimant Name	From Date	To Date	Payee Name	Trans. Date	Payment Description	Amt. Requested	Amt. Paid	
Coverage: Auto Liability											
C	3553370	3770000233	001	BABILINO, STEPHEN	10/3/2016	10/28/2016	THE GARTY LAW FIRM LLC	11/9/2016	INV CBab-10-2016	225.00	225.00
C	3553371	3770000233	001	BABILINO, STEPHEN	9/1/2016	9/19/2016	THE GARTY LAW FIRM LLC	11/9/2016	INV# CBab-09-2016	600.00	600.00
C	3557224	3770000400	001	JOHNSON, CAROLYN	9/15/2016	10/20/2016	LONG MARMERO & ASSOCIATES LLP	11/22/2016	INV 17208	1,937.50	1,937.50
Total for Coverage: Auto Liability							Number of entries: 3		2,762.50	2,762.50	
Coverage: Auto Physical Damage											
C	3553351	3770000643	001	CUMBERLAND CO IMPROVEMENT	7/11/2016	7/11/2016	CUMBERLAND CO IMPROV AUTH	11/9/2016	COLLISION LOSS SETTLEMENT	77,039.90	77,039.90
C	3553366	3770000643	001	CUMBERLAND CO IMPROVEMENT	10/3/2016	10/3/2016	MARY ELLEN GRAY DBA CLIFF	11/9/2016	INVOICE #816229B BG	295.00	295.00
C	3553367	3770000643	001	CUMBERLAND CO IMPROVEMENT	10/3/2016	10/3/2016	MARY ELLEN GRAY DBA CLIFF	11/9/2016	INVOICE #816229A BG	325.00	325.00
C	3557235	3770000643	001	CUMBERLAND CO IMPROVEMENT	11/16/2016	11/16/2016	CUMBERLAND CO IMPROV AUTH	11/22/2016	CLAIM #3770000643	550.00	550.00
F	17557	3770000643	001	CUMBERLAND CO IMPROVEMENT	7/11/2016	8/19/2016	TMT	11/17/2016	Refund of Sales Tax	-1,360.10	-1,360.10
Total for Coverage: Auto Physical Damage							Number of entries: 5		76,849.80	76,849.80	
Coverage: General Liability											
C	3551683	3770000218	001	VAZQUEZ, ROSALINA	9/21/2016	9/30/2016	BUONADONNA & BENSON PC	11/2/2016	LEGAL FEE - INV #18800	345.51	345.51
C	3553360	3770000302	001	HENNIS, DAVID	9/2/2016	9/30/2016	WEIR & PARTNERS LLP	11/9/2016	LEGAL FEE - BILL #88905186	2,803.85	2,803.85
C	3557234	3770000218	001	VAZQUEZ, ROSALINA	10/4/2016	10/31/2016	BUONADONNA & BENSON PC	11/22/2016	INV 18853	264.00	264.00
Total for Coverage: General Liability							Number of entries: 3		3,413.36	3,413.36	
Coverage: Police Professional											
C	3553350	3770000314	001	GONZALEZ, JAIME	9/1/2016	9/29/2016	BUONADONNA & BENSON PC	11/9/2016	LEGAL FEE - INV #18803	1,387.50	1,387.50
C	3553352	3770000395	001	BARLOW, RASHEE	10/4/2016	10/28/2016	BLANEY & KARAVAN PC	11/9/2016	INV 12095	806.25	806.25
C	3553359	3770000514	001	LEWIS, ROBERT	9/7/2016	9/27/2016	WEIR & PARTNERS LLP	11/9/2016	LEGAL FEE - BILL #88905185	1,424.10	1,424.10
C	3553361	3770000420	001	ALLEN, ALISSA	8/1/2016	8/31/2016	WEIR & PARTNERS LLP	11/9/2016	LEGAL FEE - BILL #88905369	2,976.20	2,976.20
C	3553362	3770000420	001	ALLEN, ALISSA	9/1/2016	9/29/2016	WEIR & PARTNERS LLP	11/9/2016	LEGAL FEE - BILL #88905368	2,552.90	2,552.90
C	3555378	3770000420	001	ALLEN, ALISSA	5/3/2016	5/31/2016	WEIR & PARTNERS LLP	11/16/2016	LEGAL FEE - BILL #88903539	206.25	206.25
C	3555379	3770000420	001	ALLEN, ALISSA	4/4/2016	4/27/2016	WEIR & PARTNERS LLP	11/16/2016	LEGAL FEE - BILL #88902754	2,400.49	2,400.49
C	3555380	3770000420	001	ALLEN, ALISSA	3/1/2016	3/31/2016	WEIR & PARTNERS LLP	11/16/2016	LEGAL FEE - BILL #88903072	3,241.26	3,241.26
C	3557247	3770000314	001	GONZALEZ, JAIME	10/19/2016	11/10/2016	CHANCE & MCCANN LLC	11/22/2016	INV 12808	888.85	888.85
Total for Coverage: Police Professional							Number of entries: 9		15,883.80	15,883.80	
Coverage: Property											
C	3558721	3770000631	001	COUNTY OF CUMBERLAND	7/1/2016	7/1/2016	COUNTY OF CUMBERLAND	11/30/2016	PROPERTY SETTLEMENT LESS DED	1,240.00	1,240.00
Total for Coverage: Property							Number of entries: 1		1,240.00	1,240.00	

Date: 12/1/2016
FinancialTransaction



Page: 2

CCIC - 377
Financial Transaction Log - Liability Claim Payments
Monthly / Detail / By Coverage / By Payment Type / By Check Number
12/01/2016 Thru 12/31/2016

Type	Check #	Claim #	Claimant Name	From Date	To Date	Payee Name	Trans. Date	Payment Description	Amt. Requested	Amt. Paid	
Coverage: Auto Liability											
C	3563178	3770000233	001	BABILINO, STEPHEN	11/1/2016	11/30/2016	THE GARTY LAW FIRM LLC	12/14/2016	LEGAL FEE - INV #CBak-11-2016	2,060.55	2,060.55
Total for Coverage: Auto Liability							Number of entries: 1		2,060.55	2,060.55	
Coverage: Auto Physical Damage											
M	2976025	3770000643	001	CUMBERLAND CO IMPROVEMENT	7/11/2016	8/19/2016	TMT	12/7/2016	INVOICE #301-071116	20,790.10	20,790.10
F	17557	3770000643	001	CUMBERLAND CO IMPROVEMENT	7/11/2016	8/19/2016	TMT	12/7/2016	Refund of Sales Tax	-1,360.10	-1,360.10
V	17557	3770000643	001	CUMBERLAND CO IMPROVEMENT	7/11/2016	8/19/2016	TMT	12/7/2016	Refund of Sales Tax	1,360.10	1,360.10
V	2976025	3770000643	001	CUMBERLAND CO IMPROVEMENT	7/11/2016	8/19/2016	TMT	12/7/2016	INVOICE #301-071116	-20,790.10	-20,790.10
Total for Coverage: Auto Physical Damage							Number of entries: 4		0.00	0.00	
Coverage: General Liability											
C	3563168	3770000184	001	STRITTMATTER, ALEXA	9/3/2016	10/26/2016	TESTA HECK SCROCCA &	12/14/2016	INV 37157	1,076.00	1,076.00
C	3564977	3770000400	001	JOHNSON, CAROLYN	10/25/2016	11/10/2016	LONG MARMERO & ASSOCIATES LLP	12/21/2016	LEGAL FEE - INV #17402	2,625.00	2,625.00
C	3566817	3770000400	001	JOHNSON, CAROLYN	11/16/2016	12/13/2016	LONG MARMERO & ASSOCIATES LLP	12/28/2016	LEGAL FEE - INV #17667	1,687.50	1,687.50
C	3566821	3770000218	001	VAZQUEZ, ROSALINA	11/7/2016	11/28/2016	BUONADONNA & BENSON PC	12/28/2016	LEGAL FEE - INV #19017	475.00	475.00
Total for Coverage: General Liability							Number of entries: 4		5,863.50	5,863.50	
Coverage: Police Professional											
C	3560773	3770000549	001	CALLAWAY, OREADER	1/26/2016	11/10/2016	SICILIANO & ASSOCIATES LLC	12/7/2016	LEGAL FEE - INV #13882	1,739.33	1,739.33
C	3560779	3770000661	001	WATSON, JON	10/17/2016	10/31/2016	WEIR & PARTNERS LLP	12/7/2016	LEGAL FEE - #5147 0008	1,475.00	1,475.00
C	3563170	3770000395	001	BARLOW, RASHEE	11/2/2016	11/21/2016	BLANEY & KARAVAN PC	12/14/2016	INV 12097	500.00	500.00
C	3564986	3770000314	001	GONZALEZ, JAIME	11/7/2016	11/28/2016	BUONADONNA & BENSON PC	12/21/2016	INV 18960	787.50	787.50
C	3564992	3770000472	001	JACOBS, RAHEEM	10/3/2016	10/31/2016	WEIR & PARTNERS LLP	12/21/2016	LEGAL FEE - BILL #88905677	718.75	718.75
C	3566820	3770000554	001	PALLIDINI, CARMELLA	8/2/2016	10/31/2016	MADDEN & MADDEN PA	12/28/2016	LEGAL FEE - STMT #2	7,585.00	7,585.00
Total for Coverage: Police Professional							Number of entries: 6		12,805.58	12,805.58	
Total for CCIC - 377							Number of entries: 15		20,729.63	20,729.63	

RESOLUTION NO. 14 -17

**CUMBERLAND COUNTY INSURANCE COMMISSION
AUTHORIZING DISCLOSURE OF LIABILITY CLAIMS CHECK REGISTER**

WHEREAS, the CUMBERLAND COUNTY INSURANCE COMMISSION (hereinafter “CCIC”) is duly constituted as an Insurance Commission pursuant to N.J.S.A. 40A:10-6 et seq.; and

WHEREAS, the CCIC is subject to the requirements of the Open Public Meetings Act, N.J.S.A. 10:4-6 et seq.; and

WHEREAS, the Open Public Meetings Act requires all meetings of public bodies be open to the public; and

WHEREAS, the Open Public Meetings Act further provides a public body may permissibly exclude the public from a portion of a meeting at which the public body discusses items per the Open Public Meetings Act at N.J.S.A. 10:4-12.b.(1) thru (9) recognized as requiring confidentiality, and

WHEREAS, it is necessary and appropriate for the CCIC to discuss certain matters in a meeting not open to the public consistent with N.J.S.A. 10:4-12.b.(7); and

WHEREAS, the CCIC is a public agency which must comply with the Open Public Records Act (OPRA) N.J.S.A. 47: 1A-1 to -13; and

WHEREAS, the CCIC must comply with OPRA and reported New Jersey Case Law interpreting same; and

NOW THEREFORE BE IT RESOLVED by the Commissioners of said Cumberland County Insurance Commission pursuant to both the Open Public Meetings Act and the Open Public Records Act as follows:

The attached financial transaction logs generated by third party administrator Inservco Insurances Inc. for the periods 11/1/16 to 12/31/16, and related to all non-workers compensation payments are hereby approved for distribution to the listed claimants and for disclosure to the general public

ADOPTED by THE CUMBERLAND COUNTY INSURANCE COMMISSION at a properly noticed meeting held on February 2, 2017.

CHAIRMAN

ATTEST:

,VICE CHAIRMAN



**Cumberland County Insurance Commission
Cumulative Savings Report
2016**

2016							
	UNITS OF SERVICE	BILLED	APPROVED	SAVINGS	% OF SAVINGS	PPO PENETRATION RATE	MANAGED CARE FEE
JANUARY	4	\$967.00	\$682.00	\$285.00	29.5%	100.0%	\$37.05
FEBRUARY	24	\$7,181.94	\$4,696.07	\$2,485.87	34.6%	100.0%	\$323.16
MARCH	21	\$5,375.96	\$2,975.35	\$2,400.61	44.7%	100.0%	\$312.08
APRIL	24	\$6,827.23	\$3,500.25	\$3,326.98	48.7%	100.0%	\$432.51
MAY	12	\$5,934.18	\$3,668.46	\$2,265.72	38.2%	100.0%	\$294.54
JUNE	27	\$7,522.55	\$4,793.69	\$2,728.86	36.3%	100.0%	\$354.75
JULY	34	\$11,925.40	\$7,629.35	\$4,296.05	36.0%	100.0%	\$558.49
AUGUST	41	\$29,170.17	\$18,391.18	\$10,778.99	37.0%	96.9%	\$1,401.27
SEPTEMBER	29	\$20,334.95	\$9,362.43	\$10,972.52	54.0%	94.8%	\$1,426.43
OCTOBER	22	\$25,219.69	\$13,733.51	\$11,486.18	45.5%	100.0%	\$1,493.20
NOVEMBER	26	\$25,906.01	\$12,646.08	\$13,259.93	51.2%	95.2%	\$1,723.79
DECEMBER	24	\$58,065.79	\$16,613.27	\$41,452.52	71.4%	99.4%	\$5,388.83
TOTALS	288	\$204,430.87	\$98,691.64	\$105,739.23	51.7%	98.9%	\$13,746.10



**CUMBERLAND COUNTY INSURANCE COMMISSION
PPO SAVINGS AND PENETRATION REPORT
JANUARY 1, 2016 - DECEMBER 31, 2016**

	UNITS OF SERVICE	BILLED	APPROVED	SAVINGS	% OF SAVINGS
Participating Provider	280	\$200,884.59	\$95,480.96	\$105,403.63	52.5%
Ortho/Neuro	80	\$77,103.45	\$30,489.03	\$46,614.42	60.5%
Facility	19	\$64,129.94	\$32,674.94	\$31,455.00	49.0%
Occ Med/Primary Care	136	\$36,055.00	\$24,268.86	\$11,786.14	32.7%
Physician Fees	28	\$12,670.20	\$5,057.91	\$7,612.29	60.1%
Anesthesia/Pain Management	3	\$4,826.00	\$448.04	\$4,377.96	90.7%
Anesthesia	1	\$4,250.00	\$1,411.00	\$2,839.00	66.8%
Other	11	\$1,100.00	\$715.00	\$385.00	35.0%
Pain Management	2	\$750.00	\$416.18	\$333.82	44.5%
Out Of Network	8	\$3,546.28	\$3,210.68	\$335.60	9.5%
Other	8	\$3,546.28	\$3,210.68	\$335.60	9.5%
Grand Total	288	\$204,430.87	\$98,691.64	\$105,739.23	51.7%

Participating Provider Penetration Rate 98.3%

**CUMBERLAND COUNTY INSURANCE COMMISSION
TOP 10 PROVIDER REPORT
JANUARY 1, 2016 - DECEMBER 31, 2016**

	UNITS OF SERVICE	APPROVED
RECONSTRUCTIVE ORTHOPED	85	\$22,948.84
INSPIRA HEALTH NETWORK UR	125	\$22,783.52
INSPIRA MEDICAL CENTER VINE	9	\$14,573.85
KENNEDY UNIVERSITY HOSPIT/	3	\$8,664.74
PREMIER ORTHOPAEDIC ASSO	3	\$7,823.46
SALEM HOSPITAL CORPORATIC	1	\$3,200.76
INSPIRA MEDICAL CENTER ELM	4	\$2,940.98
COHANZICK ORTHOPEDICS, P/	5	\$1,988.82
AMBULATORY CARE CENTER	1	\$1,750.00
INSPIRA MEDICAL CENTER WOX	1	\$1,544.61
Grand Total	237	\$88,219.58

Valued as of 1/20/17

APPENDIX I – MEETING MINUTES

**CUMBERLAND COUNTY INSURANCE COMMISSION
OPEN MINUTES
MEETING – DECEMBER 1, 2016
164 WEST BROAD STREET
BRIDGETON, NJ 11:00 AM**

Meeting called to order by Chairman Thomas Sheppard. Open Public Meetings notice read into record.

ROLL CALL OF COMMISSIONERS:

Thomas Sheppard	Present
Ken Mecouch	Present
Gerald Seneski	Present

ALTERNATE COMMISSIONER

Kim Wood	Present
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FUND PROFESSIONALS PRESENT:

Executive Director	PERMA Risk Management Services Joseph Porch, Brad Stokes Karen A. Read
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ALSO PRESENT:

Anthony Bontempo, Cumberland County
Ted Baker, Cumberland County
Craig Atkinson, Cumberland County
Bonnie Ridolfino, Hardenbergh Insurance Group
Pat Madden, Madden & Madden
Amy Zeiders, Inservco
Veronica George, Inservco
Ashley Nelms, Inservco
Karen Beatty, Qual-Lynx
Glenn Prince, JA Montgomery
Danielle Batchelor, Conner Strong & Buckelew

PUBLIC PRESENT:

Eileen Clark

APPROVAL OF MINUTES: OPEN AND CLOSED SESSION OF OCTOBER 6, 2016 AND OCTOBER 27, 2016

MOTION TO APPROVE THE OPEN AND CLOSED MINUTES OF OCTOBER 6, 2016 AND OCTOBER 27, 2016

Moved:	Commissioner Mecouch
Second:	Commissioner Seneski
Vote:	Unanimous

CORRESPONDENCE: None

EXECUTIVE DIRECTOR REPORT:

2017 Property & Casualty Budget Introduction – Attached on page 3 for your review and discussion is the 2017 proposed Property and Casualty Budget in the amount of \$2,893,351. The introductory budget represents a 0.95% increase Commission wide compared to the 2016 budget. Proposed Assessments will be distributed at the meeting.

Executive Director said Section 1 of the Budget includes our claims costs and excess coverage costs. Line six shows the aggregate increase at a flat 2% and line 11 lists our excess premium contribution which is a -.62% and finally line 12 is our total loss fund aggregated at 1.08%. In Section II are our Expenses Fees and Contingency which net out to an aggregate 1.83% increase. Risk Manager and Ancillary Coverages are all a flat renewal. The aggregate increase for the entire budget is 0.95%. Executive Director said the proposed assessments by entity have been distributed to members.

MOTION TO INTRODUCE THE 2017 PROPERTY AND CASUALTY BUDGET IN THE AMOUNT OF \$2,893,351 AND SCHEDULE A PUBLIC HEARING ON FEBRUARY 2, 2017 AT 11:00 AM AT THE COUNTY ADMINISTRATION BUILDING

Moved:	Commissioner Seneski
Second:	Commissioner Mecouch
Vote:	Unanimous

Fund Professional Contracts – The contract for Fund Administrator expires on December 31, 2016. Per the Administrators contract, the Commission, at its sole discretion may extend contracts for two additional one year terms.

MOTION TO RE-APPOINT PERMA RISK MANAGEMENT SERVICES AS FUND ADMINISTRATOR FOR A ONE YEAR PERIOD EFFECTIVE JANUARY 1, 2017 THROUGH DECEMBER 1, 2017

Moved: Commissioner Mecouch
Second: Commissioner Seneski
Vote: Unanimous

Amending the Fund Cash Management Plan – The Fund has determined it is in the best interest to move it’s accounts to Ocean First Bank. The Fund’s Cash Management Plan should be amended to reflect this change.

MOTION TO APPROVE RESOLUTION 27-17 AMENDING THE FUND’S CASH MANAGEMENT PLAN AND DESIGNATING DEPOSITORIES

Moved: Commissioner Seneski
Second: Commissioner Mecouch
Vote: Unanimous

Certificate of Insurance Issuance Report: Executive Director reported on page 5 of the agenda was the Certificate of Insurance Issuance Report from the CEL listing those certificates issued for the period of September 26, 2016 to November 21, 2016. There were 2 certificates of insurance issued during this period.

MOTION TO APPROVE THE CERTIFICATE OF INSURANCE REPORT

Moved: Commissioner Mecouch
Second: Commissioner Seneski
Vote: Unanimous

NJ Excess Counties Insurance Fund (CELJIF) – A sub-committee met on October 17, 2016 to review the preliminary 2017 budget. The CELJIF met on October 27, 2016 and introduced the CEL 2017 Budget. The proposed budget represented a total of \$20,914,827 or a decrease of 1.7%. A summary report of the meeting is included in the agenda on pages 6-7. The public hearing and adoption of the budget was held on November 17, 2016.

Financial Fast Track– Included on page 8 and 9 of the agenda are the Financial Fast Tracks for the Cumberland County Insurance Commission for August and September. As of September 30, 2016 the Commission has a statutory surplus of \$1,559,748. Executive Director said this reflects a net gain of approximately \$12,000.

NJ CEL Property and Casualty Financial Fast Track (Page 10) – Executive Director reported included in the agenda is the NJ CEL Financial Fast Track Reports for September. As of September 20, 2016 the CEL has a surplus of \$7,631,542.

Claims Tracking Report (Page 11) – Included in the agenda was the Claims Activity Report for October that tracks open claims. Executive Director said the total open claims for all lines was reduced from 89 to 82.

Reporting of Claims to Claims Made Policies Prior to 12/31/2016 Expiration – Included in the agenda on pages 12-18 is a copy of a letter from Danielle Batchelor regarding reporting of claims to claims made policies prior to 12/31/16 along with the applicable limit schematics. Ms. Batchelor said this is just a reminder, as we do every year, that as the year comes to close and your renewals come due 1/1 you do have some coverages that are claims made and reported or discovery and reported. We ask each member go back and do a review of their claims to see if there is anything that should be reported as a claim or a potential claim. Please be sure to report this information to your Risk Manager Bonnie Ridolfino. If you have any questions please feel free to reach to Bonnie or myself and we will be happy to help.

2017 Auto ID Cards/WC Posting Notices/Renewal of Certificate of Insurances – The 2017 auto ID cards and WC Posting Notices will be sent to each member entity representative for distribution on or about December 10th. The CEL Underwriting Manager's team will review any certificates which need to be re-issued for the 2017 renewal.

2017 CEL Excess Insurance Renewal - The CEL Underwriting Manager will provide an update on their renewal marketing efforts.

Underwriting Manager Edward Cooney said the marketing has been going well and the insurers we are partnering are doing a great job. A few high level results we are looking at within the entire membership of the counties program we are looking at 5% decreases on the workers comp with our partner Safety National and a 5% decrease on the liability program, and on the property even after a few tough losses over the past few years our partner Zurich is going to come through with a flat renewal with their only questionable area being vacant properties which you will see a little more deductible there but we are going to work on that issue over the next year.

SAFETY COMMITTEE: Craig Atkinson reported on the accident and injury statistics and said for 2016 the County had a total of 24 property damage accidents - 9 were at fault, for a percentage of 38%.

Mr. Atkinson said in 2016 the County has only suffered 5 lost time personal injury accidents and suffered 45 total lost days. Mr. Atkinson discussed details of the lost time accident cases. There were 21 total modified duty personal injury accidents 440 modified duty days. Mr. Atkinson said the overall injury number for 2016 is at 75.

Mr. Atkinson said the next Safety and Accident Review Committee will meet on Tuesday,

December 13, 2016. Mr. Atkinson said with the 28 jail recruits in 2016 we had an 88% graduation rate. This is much improved from the 50% in previous years.

Mr. Atkinson reported, on October 24th and 25th we trained 43 people on the fire extinguisher simulator. Mr. Atkinson said 5 people from the County attended the CEL Best Practices Workshop which was an excellent program. Mr. Atkinson discussed various training members attended.

CLAIMS COMMITTEE: Daniel Batchelor reported the Claims Committee last met on November 15th and there are eight payment authorization requests for review in Executive Session today.

TREASURER:

REPORT: Mr. Bontempo reported on the December bills list which was included in the agenda.

MOTION TO APPROVE RESOLUTION 28-16 DECEMBER BILLS LIST IN THE AMOUNT OF \$20,196.77

Motion:	Commissioner Seneski
Second:	Chairman Mecouch
Roll Call Vote:	3 Ayes, 0 Nays

CEL SAFETY DIRECTOR: Safety Director reviewed the Safety Director's report included in the agenda as well as future training opportunities that are being offered by JA Montgomery Risk Control. Mr. Prince said there was a request made that he go out to visit the County buildings to assess and detect any trip and fall hazards. Mr. Atkinson accompanied Mr. Prince last month and they have been able to make some recommendations and that report will be forwarded electronically and will be included in next month's agenda.

RISK MANAGER: Risk Manger Bonnie Ridolfino said on page 12 of the agenda it lists Cumberland County Board of Social Services and we do realize they are part of the County but we do need to keep them on as a named insured for a couple of years because of the statute of limitations. In February we will be bringing the Litigation Management Plan to the Commission for amendment. Ms. Ridolfino said she will be sending out a bulletin on space heaters. The Safety Committee will meet next we will be sending out a memo on those if you are utilizing them. Ms. Ridolfino said she will be reviewing the Safety Grant from Safety National and we would like to make sure we have our idea early since there are more CEL members submitting their requests as well.

CLAIMS SERVICE: Veronica George of Inservco reported there was no First MCO report.

Executive Director the Liability Claims Payments for September and October were included on pages 24 thru 25 and Resolution 29-16 Authorizing the Disclosure of the Liability Claims Check Register.

MOTION TO APPROVE RESOLUTION 29-16 AUTHORIZING DISCLOSURE OF LIABILITY CLAIMS CHECK REGISTER

Motion: Commissioner Mecouch
Second: Chairman Seneski
Vote: Unanimous

MANAGED CARE: Ms. Beatty reviewed the 2016 Saving Report showing a 45.5% of savings for the month of October and year to date savings of 42.4%.

MOTION TO GO INTO EXECUTIVE SESSION FOR CERTAIN SPECIFIED PURPOSES FOR PERSONNEL, SAFETY, PUBLIC PROPERTY OR LITIGATION IN ACCORDANCE WITH THE OPEN PUBLIC MEETINGS ACT - PAYMENT AUTHORIZATION REQUESTS OR SETTLEMENT AUTHORIZATION REQUESTS

Motion: Commissioner Mecouch
Second: Commissioner Seneski
Vote: Unanimous

MOTION TO RETURN TO OPEN SESSION

Motion: Commissioner Mecouch
Second: Commissioner Seneski
Vote: Unanimous

Liability Payment/Settlement Authorization Request

MOTION TO APPROVE PAYMENT / SETTLEMENT AUTHORIZATION REQUEST FOR CLAIM #3770000554 IN THE AMOUNT OF \$172,500.00

Motion: Commissioner Seneski
Second: Commissioner Wood

Liability Payment Authorization Requests

MOTION TO APPROVE PAYMENT AUTHORIZATION REQUEST FOR CLAIM #3770000314 IN THE AMOUNT OF \$40,000.00

Motion: Commissioner Seneski
Second: Commissioner Wood

MOTION TO APPROVE PAYMENT AUTHORIZATION REQUEST FOR CLAIM #3770000514 IN THE AMOUNT OF \$81,500.00

Motion: Commissioner Seneski
Second: Commissioner Wood

MOTION TO APPROVE PAYMENT AUTHORIZATION REQUEST FOR CLAIM #3770000420 IN THE AMOUNT OF \$125,848.00

Motion: Commissioner Seneski
Second: Commissioner Wood

Workers Comp Payment Authorization Request

MOTION TO APPROVE PAYMENT AUTHORIZATION REQUEST FOR CLAIM #3770000673 IN THE AMOUNT OF \$26,875.00

Motion: Commissioner Seneski
Second: Commissioner Wood

Workers Comp Payment / Settlement Authorization Request

MOTION TO APPROVE PAYMENT AUTHORIZATION REQUEST FOR CLAIM #3770000211 IN THE AMOUNT OF \$17,352.35

Motion: Commissioner Seneski
Second: Commissioner Wood

MOTION TO APPROVE PAYMENT AUTHORIZATION REQUEST FOR CLAIM #3770000368 IN THE AMOUNT OF \$20,351.46

Motion: Commissioner Seneski
Second: Commissioner Wood

Settlement Authorization Requests

MOTION TO APPROVE SETTLEMENT AUTHORIZATION REQUEST FOR CLAIM #3770000365 IN THE AMOUNT OF \$15,000.00

Motion: Commissioner Seneski
Second: Commissioner Wood

MOTION TO APPROVE PARS AND SARS DISCUSSED IN EXECUTIVE SESSION:

Motion: Commissioner Mecouch
Second: Chairman Seneski
Vote: 3 Ayes, 0 Nays

OLD BUSINESS: None

NEW BUSINESS: None

PUBLIC COMMENT: None

MOTION TO ADJOURN:

Motion: Commissioner Seneski
Second: Chairman Mecouch
Vote: Unanimous

MEETING ADJOURNED: 12:20 PM

NEXT MEETING: WILL BE HELD ON FEBRUARY 2, 2017 AT 11:00

Minutes prepared by: Karen A. Read, Assisting Secretary

**CUMBERLAND COUNTY INSURANCE COMMISSION
OPEN MINUTES
SPECIAL MEETING – DECEMBER 20, 2016 VIA TELEPHONE CONFERENCE
WITH PUBLIC ACCESS AT - 164 WEST BROAD STREET
BRIDGETON, NJ 11:00 AM**

Meeting called to order by Chairman Thomas Sheppard. Open Public Meetings notice read into record.

ROLL CALL OF COMMISSIONERS:

Thomas Sheppard	Present
Ken Mecouch	Present
Gerald Seneski	Present

ALTERNATE FUND COMMISSIONER:

Kim Wood	Present
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FUND PROFESSIONALS PRESENT:

Executive Director	PERMA Risk Management Services Joseph Porch, Bradford Stokes, Karen Read
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ALSO PRESENT:

Ted Baker, Cumberland County
Steve Errikson, Cumberland County UA (telephonically)
Bonnie Ridolfino, Hardenbergh Insurance Group
Amy Zeiders, Inservco (telephonically)
Keith Platt, Inservco (telephonically)
Veronica George, Inservco (telephonically)
Matt Baron, Inservco (telephonically)
Glenn Prince, JA Montgomery (telephonically)
Danielle Batchelor Conner Strong & Buckelew (telephonically)

PUBLIC:

Nancy Ridgeway
Ray Penn
Latina Penn

CORRESPONDENCE: None

PUBLIC COMMENT:

Ray Penn and Latina Penn were present at the meeting to discuss a claim they had filed against the County of Cumberland regarding a motor vehicle accident on Roadway CR-640 with regard to a large tree which fell onto the roadway in Upper Deerfield Cumberland County on August 31, 2016. Attorney Baker asked if Mr. and Mrs. Penn contacted the owner of the property from which the tree fell. Mrs. Penn said they did not. Attorney Baker said the tree is not the property of the County and in the State of New Jersey when you are filing a claim against a public entity with regard to a dangerous condition of public property it has to be property that we either a: own or control, which we did own the roadway, and b: you have to be able to show we had notice of it sufficiently in advance of when the accident occurred, so we can take steps against the condition. Attorney Baker said there was no notice of anyone calling the County to say a tree was down prior to this accident. Attorney Baker said if we were notified we would have taken the steps to have the problem eliminated. Attorney Baker said the tree was on our road but is not our tree and the question is did we have sufficient notice to do something about the tree before the accident occurred.

Mrs. Penn said the roadway was dark and there was no power and she feels someone should be responsible for the loss. If you are a licensed driver and come across this catastrophe, you would look to the person that is responsible. This has caused us hardship and we feel it is not unfair to ask for reimbursement. Commissioner Mecouch said the owner of the tree would be the responsible party and if the County did not have notice we would not be responsible for a tree falling from a private persons property falling and blocking a county road. Executive Director said you can go to the Township of Upper Deerfield Township and give them the location and mile marker where the tree fell they can tell you who the owner of the property is. Ted Baker said the tax assessor should be able to give you the information of the property owner. Attorney Baker said the matter will be discussed in Closed Session and the County will respond to you with the outcome.

EXECUTIVE DIRECTORS REPORT:

FUND PROFESSIONAL CONTRACTS - The contract for Fund Claims Administrator expires on December 31, 2016. Per the Claims Administrator contract, the Commission, at its sole discretion, may extend contracts for two additional one year terms.

MOTION TO RE-APPOINT INSERVCO INSURANCE SERVICES AS FUND CLAIMS ADMINISTRATOR FOR A ONE YEAR PERIOD EFFECTIVE JANUARY 1, 2017 THROUGH DECEMBER 31, 2017.

Motion:	Commissioner Sheppard
Second:	Commissioner Seneski
Roll Call Vote:	3 Ayes, 0 Nays

AMENDING CLAIMS ADMINISTRATORS CONTRACT - Language in the current Inservco contract needs to be amended to correct the contract term. (Page 2) Attorney Baker said this contract was approved with one year renewals. When we received the contract we did not realize it had a three year term so we had to amend it and Inservco agrees. So these are one extensions the amendment we are making to the contract.

MOTION TO APPROVE RESOLUTION 30-16 AMDENDING INSERVCO SERVICES CONTRACT TERM

Motion: Commissioner Seneski
Second: Commissioner Sheppard
Roll Call Vote: 3 Ayes, 0 Nays

MOTION TO GO INTO EXECUTIVE SESSION FOR CERTAIN SPECIFIED PURPOSES FOR PERSONNEL, SAFETY, PUBLIC PROPERTY OR LITIGATION IN ACCOURDANCE WITH THE OPEN PUBLIC MEETINGS ACT - PAYMENT AUTHORIZATION REQUESTS

Motion: Commissioner Seneski
Second: Commissioner Sheppard
Vote: Unanimous

MOTION TO RETURN TO OPEN SESSION

Motion: Commissioner Seneski
Second: Commissioner Sheppard
Vote: Unanimous

Workers' Compensation Authorization Request Presented by Veronica George

MOTION TO APPROVE PAYMENT AUTHORIZATION REQUEST FOR CLAIM #3770000639 IN THE AMOUNT OF \$83,350.00

Motion: Commissioner Sheppard
Second: Commissioner Seneski
Vote: 3 Ayes, 0 Nays

MOTION TO APPROVE PAYMENT AUTHORIZATION REQUEST FOR CLAIM #3770000252 IN THE AMOUNT OF \$57,933.50

Motion: Commissioner Sheppard
Second: Commissioner Seneski
Vote: 3 Ayes, 0 Nays

Liability Authorization Request Presented by Amy Zieders

**MOTION TO APPROVE PAYMENT AUTHORIZATION REQUEST FOR CLAIM
#3770000400 IN THE AMOUNT OF \$33,750.00**

Motion: Commissioner Sheppard
Second: Commissioner Seneski
Vote: 3 Ayes, 0 Nays

OLD BUSINESS: None

NEW BUSINESS: Commissioner Mecouch said since this is Freeholder Sheppard's last meeting we would like to thank him for his service both as a County Freeholder and on this Insurance Commission.

PUBLIC COMMENT: None

MOTION TO ADJOURN:

Motion: Commissioner Sheppard
Second: Commissioner Seneski
Vote: Unanimous

MEETING ADJOURNED: 11:44AM

NEXT MEETING: WILL BE HELD ON FEBRUARY 2, 2017 AT 11:00

Minutes prepared by: Karen A. Read, Assisting Secretary

APPENDIX II
INSERVCO STEWARDSHIP REPORT