

**FINAL**  
**MINUTES OF THE MEETING OF THE**  
**NEW JERSEY INDIVIDUAL HEALTH COVERAGE PROGRAM BOARD**  
**AT THE OFFICES OF THE**  
**NEW JERSEY DEPARTMENT OF BANKING AND INSURANCE**  
**TRENTON, NEW JERSEY**  
**March 11, 2014**

**Directors participating in person:** Neil Sullivan (DOBI)

**Directors participating by phone:** Sandi Kelly (Horizon); Lisa Levine (United); Christine Stearns; Tony Taliaferro (AmeriHealth); Mary Taylor (Aetna)

**Others participating:** Ellen DeRosa, Executive Director; Chanell McDevitt, Deputy Executive Director; Eleanor Heck, Deputy Attorney General.

**I. Call to Order**

E. DeRosa called the meeting to order at 10:02 A.M. She announced that notice of the meeting had been published in two newspapers of general circulation and posted at the Department of Banking and Insurance (“DOBI”), the DOBI website, the Office of the Secretary of State and submitted to the State House Press Corps, in accordance with the Open Public Meetings Act. A quorum was present. She stated that votes would be by roll call because most Board members were participating by phone.

**II. Minutes – February 11, 2014**

**M. Taylor made a motion, seconded by T. Taliaferro, to approve the minutes of February 11, 2014, without amendment. By roll call vote, the motion carried.**

**III. Staff Report**

*Expense Report and Transfer of Funds*

E. DeRosa stated that the Board has expenses totaling \$10,854.85 on the March 2014 expense report, primarily for the IHC Board’s portion of salaries and fringe, but also for R. Lenox’s continuing professional education course and CPA license. She stated that the Board would need to approve a transfer of \$11,000 from its Wells Fargo Money Market account to its Wells Fargo Checking account, if the Board approved payment of its operating expenses on the March expense report.

**C. Stearns made a motion, seconded by L. Levine, to approve payment of the expenses, and to approve the transfer of \$11,000 from the Board’s Wells Fargo Money Market account to its Wells Fargo Checking account in order to pay March operating expenses. By roll call vote, the motion carried.**

**IV. 2015 Open Enrollment Period**

The question arose as to what the Board and carriers may need to do to acknowledge the federally-prescribed deviation in the annual open enrollment period as it applies for calendar year 2015. It was generally agreed that there is no need to revise the policy forms, but that carriers will need to let existing customers (and others) know, and that it may be appropriate to change information that the Board has on its website and in HINT forms.

#### **V. Out-of-Network Reimbursement**

It was suggested that the Board needs to resume discussion of how to revise its standards for out-of-network benefits given the discontinuation of the Prevailing Healthcare Charges System. It was agreed that the discussion would be put on the Board's agenda for April, and that E. DeRosa would send out the most recent draft of the White Paper prepared on the topic, along with the Board's discussions as referenced in minutes, to help remind Board members of the Board's most recent activity on the subject matter. It was agreed that one of the questions for the Board is whether to move with or without the SEH Board.

#### **VI. Nominations for Vacancies**

E. DeRosa told Board members that nomination forms for soon-to-be vacancies in the seats for a health service corporation, HMO, and foreign insurer had been distributed, in anticipation of a vote in May.

#### **VI. Close of Meeting**

**L. Levine made a motion, seconded by M. Taylor, to adjourn the meeting. By roll call vote, the motion carried.**

*[The meeting adjourned at 10:22 A.M.]*