STATE OF NEW JERSEY
INDIVIDUAL HEALTH COVERAGE PROGRAM

Financial Statements

June 30, 2001

With Independent Auditors' Report

State of New Jersey
Individual Health Coverage Program
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June 30, 2001

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Independent Auditors' Report

To the Board of Directors,
State of New Jersey Individual Health Coverage Program

We have audited the accompanying balance sheet of the State of New Jersey Individual Health Coverage Program (the "Program"), as of June 30, 2001, and the related statements of revenues, expenditures and changes in unrestricted fund balance, and changes in assets and liabilities-loss assessment fund for the year then ended. These financial statements are the responsibility of the Program's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Program's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Program as of June 30, 2001, and the changes in its unrestricted fund balance and the changes in its assets and liabilities-loss assessment fund for the year then ended in conformity with accounting principles generally accepted in the United States of America.

WithumSmith+Brown, PC

February 13, 2009

State of New Jersey
Individual Health Coverage Program
Balance Sheet
June 30, 2001

Assets	General Fund	Loss Assessment Fund (Agency Fund)	Total (Memorandum Only)
Cash and cash equivalents	$ 9,492,831	$ --	$ 9,492,831
Restricted cash - treasury	12,415,765	--	12,415,765
Total cash and cash equivalents	21,908,596	--	21,908,596
Accounts receivable			
Accounts receivable - members (billed)	460	--	460
Accounts receivable - members (unbilled)	16,930,992	--	16,930,992
Accounts receivable - other	104	--	104
Due from general fund	--	22,478,991	22,478,991
Total accounts receivable	16,931,556	22,478,991	39,410,547
Prepaid expenses	80	--	80
	$ 38,840,232	$ 22,478,991	$ 61,319,223
Liabilities and fund balance			
Due to loss assessment fund	$ 22,478,991	$ --	$ 22,478,991
Interest payable - members	2,361,567	--	2,361,567
Accrued expenses	1,445,545	--	1,445,545
Due to SEH program	138,364	--	138,364
Net paid loss reimbursement due - members	--	22,478,991	22,478,991
Total liabilities	26,424,467	22,478,991	48,903,458
Fund balance			
Restricted	12,415,765	--	12,415,765
Unrestricted	--	--	--
Total fund balance	12,415,765	--	12,415,765
	$ 38,840,232	$ 22,478,991	$ 61,319,223

The Notes to Financial Statements are an integral part of these statements.

State of New Jersey
Individual Health Coverage Program
Statement of Revenues, Expenditures and Changes in Unrestricted Fund Balance
For the Year Ended June 30, 2001

Revenues	
Administrative assessment	$ 587,229
Expenditures	
Current operations	
Audit fees-loss reimbursements and program	223,100
Salaries and fringe benefits	183,037
Legal fees	103,508
Other administrative expenses	10,481
Marketing expenses	23,646
Printing expenses	12,388
Professional services	31,089
Total expenditures from current operations	587,249
Other income and expenditures	
Other miscellaneous income	20
Total other income and expenditures	20
Net change in unrestricted fund balance	--
Unrestricted fund balance - beginning of year	--
Unrestricted fund balance - end of year	$ --

The Notes to Financial Statements are an integral part of these statements.

State of New Jersey Individual Health Coverage Program
Statement of Changes in Assets and Liabilities -
Loss Assessment Fund
For the Year Ended June 30, 2001

	Beginning Balance	Additions	Deductions	Ending Balance
Due from general fund	$ 17,796,410	$ 7,555,769	$ 2,873,188	$ 22,478,991
Net paid loss reimbursement due - members	$ 17,796,410	$ 7,555,769	$ 2,873,188	$ 22,478,991

The Notes to Financial Statements are an integral part of these statements.

1. Organization and Purpose

The State of New Jersey Individual Health Coverage Program ("Program") was created pursuant to N.J.S.A. 17B:27A-2 to 16, amended by L.1993, c.164, L. 1994, c.102, L. 1995, c.291, L. 1997, c.146, L. 2001, c.368 and L. 2008, c.38. It has as its members all insurance companies, health service corporations, hospital service corporations, medical service corporations, and health maintenance organizations that issue or have in force health benefits plans in New Jersey. The purpose of the Program is to assure the availability of standardized individual health benefits plans and basic and essential plans in New Jersey on an open enrollment, community-rated or modified community-rated basis, and to reimburse certain losses of member companies for the calendar year ended December 31, 1992 pursuant to N.J.S.A. 17B:27A-13, for each calendar year ended December 31, 1993 through December 31, 1996, and for each two-year calculation period through 2007/2008 pursuant to N.J.S.A. 17B:27A-12, as amended. The Program is tax-exempt.

In 1998 one carrier challenged the assessment methodology. In May 2004, in In re New Jersey Individual Health Coverage Program's Readoption of the N.J.A.C. 11:20-1 et seq., the Supreme Court invalidated the method used in calculating the loss assessment for the 1997/1998 calculation period and forward. In 2004 another carrier filed a challenge asserting that the Supreme Court decision should also apply to loss assessments for the 1993 through 1996 calculation periods. The Program Board's new methodology for the years beginning with the 1997/1998 calculation period was published in the February 21, 2006 New Jersey Register as a proposal. The proposal was adopted on December 18, 2006. Based on the new methodology, reconciliations for assessment periods 1997/1998, 1999/2000 and assessments for 2001/2002 were completed in fiscal year 2007 and assessments for 2003/2004 and 2005/2006 periods were completed in fiscal year 2008.

2. Basis of Presentation and Accounting Policies

The Program's financial statements are prepared in accordance with accounting principles generally accepted in the United States of America as prescribed by the Governmental Accounting Standards Board ("GASB"). The Program follows the pronouncements of all applicable Financial Accounting Standards Board Statements and Interpretations, Accounting Principles Board Opinions and Accounting Research Bulletins on Accounting Procedures issued on or before November 30, 1989, unless they conflict with or contradict GASB pronouncements. In addition all financial records are kept in accordance with the State of New Jersey's prescribed policies and procedures.

Cash and Cash Equivalent

Cash and cash equivalents include cash held in banks, and cash held by the State of New Jersey. The Program's total cash and cash equivalents were $21,908,596 at June 30, 2001. The Program's bank balances were $9,440,376 at June 30, 2001, of which $658 was insured by the Federal Deposit Insurance Corporation held in the Program's name by the Program's financial institutions or agents.

As of June 30, 2001, the Program had $9,439,718 in demand deposits invested in the Evergreen Treasury money market funds, which have no maturity date. The monies were invested in these funds because of the very low risk of loss with a higher level of interest income, and the funds are readily available for reimbursement of losses and/or payment of Program expenses. The Evergreen Treasury money market funds at June 30, 2001 consisted primarily of U.S. Treasury Securities and other obligations of the U.S. government which are guaranteed by the U.S. government and therefore are not considered to have credit risk. These funds were recorded at fair value, and interest income was recorded when earned as a payable to member companies. As of June 30, 2001, the amount of interest income held by the Program was $2,361,567. The amount of interest earned shall be distributed to member carriers in accordance with N.J.A.C. 11:20-2.7(c)2 upon completion of the loss audits, issuance of final assessments, and settlement of outstanding litigation.

Cash held by the State of New Jersey Department of Banking and Insurance (DOBI) include funds used for payment of Program expenses, such as staff salaries, fringe benefits, and other miscellaneous expenses that are provided through State sources. The State of New Jersey also holds restricted cash funds that are related to litigation over disputed assessment amounts. As of June 30, 2001, the restricted cash balance was $12,415,765.

Cash and cash equivalents consist of	
Commercial Checking	$ 658
NJ State - IHC DOBI - Admin	52,455
Demand Deposits	9,439,718
Restricted Cash	12,415,765
Total Cash and Cash Equivalents	$ 21,908,596

Accounts Receivable

Billed
Accounts receivable consists of amounts receivable from member carriers that were billed a loss assessment to fund reimbursement to those carriers offering individual health coverage in the State of New Jersey that incurred reimbursable losses. Member carriers are also billed an administrative assessment to fund the budgeted amount for Program expenses. No allowance for doubtful amounts was recorded since any uncollectible amounts, should they occur, would be reallocated to other member carriers in accordance with N.J.S.A. 17B:27A-11 and 12.

Unbilled
Accounts Receivable Unbilled consists of amounts to be invoiced to member carriers for loss assessments, adjustments to loss assessments due to audit adjustments, appeals, or settlement of litigation, amounts awaiting final assessment reconciliations for administrative expenses which were originally billed based on the budget for that fiscal year, and the amount of restricted fund balance.

Net Paid Loss Reimbursements Due to Members
Net paid loss reimbursements due to members represents amounts due to member carriers who have incurred reimbursable losses as a result of offering individual health coverage in the State, in accordance with N.J.A.C. 11:20-8.5. The liability is recorded in the year the paid losses are reported by the members. As of June 30, 2001, approximately $22.5 million was due to fourteen carriers for the losses incurred for the 1992-2000 calculation periods.

Pursuant to N.J.A.C. 11:20-8.8, audits are performed for carriers with reported net paid reimbursable losses, for each calculation period. Due to the timing of the audits, any adjustments are recorded in the year the audit is completed. No provision has been made in the accompanying financial statements to reflect the possible results of on-going loss audits.

Revenues and Operating Expenditures
Revenues and expenditures are related to the operation of the Program. Revenues are based on an administrative assessment to the member carriers pursuant to N.J.A.C. 11:20-2.12 of a budgeted amount approved by the IHC Program Board. Other income and expenditures consist of purchases of buyer's guides and copy fees. Revenues are recorded when earned; other income are recorded when collected. Expenditures are recorded when incurred.

There is no balance for the unrestricted fund balance of the Program pursuant to N.J.A.C. 11:20-2.12(a). A final reconciliation of the assessment for administrative expenses shall be made upon approval of the final audited statement of the Program's financial statements. The member's share shall be calculated based on the audited amount of the expenses and credited for any money advanced against the previous assessment.

Related Party Transactions
Although the Program and Small Employer Health Benefits Program ("SEH Program") are distinct state agencies and have separate Boards of Directors and regulations, the programs share the staff, thus salaries, fringe benefits and other miscellaneous expenses incurred through the Department of Banking and Insurance are recorded equally by each program. In 2001 charges to and from the SEH Program amounted to $2,429 and $186,268, respectively. As of June 30, 2001 the Program owed the SEH Program $138,364.

Pensions
The staff of the Program is covered under the State Health Benefits Plan, which includes health, dental, and prescription coverage.

The State offers seven defined benefit pension funds: Public Employees' Retirement System ("PERS"), Teachers' Pension and Annuity Fund ("TPAF"), Police and Firemen's Retirement System ("PFRS"), State Police Retirement System ("SPRS"), Judicial Retirement System ("JRS"), Consolidated Police and Firemen's Pension Fund ("CPFPF"), and the Prison Officers' Pension Fund ("POPF"). The staff of the Individual Health Coverage Program are members of the PERS.

The PERS was established in 1955 by New Jersey Statute and can be found in the New Jersey Statutes annotated, Title 43, Chapter 15A. Changes in the law can only be made by an act of the State legislature. Rules governing the operation and administration of the system may be found in Title 17, Chapters 1 and 2 of the New Jersey Administrative Code. The system was established to provide retirement, death and disability benefits, including post-retirement health care, to all full-time employees of the State and any county, municipality, school district, or public agency provided the employee is not a member of any other state-administered retirement system. Membership is mandatory for such employees.

Vesting occurs after 8 to 10 years of service for pension benefits and 25 years for post-retirement health care coverage. Members are always fully vested in their own contributions and, after three years of service credit, become vested for 2% of the related interest earned on the contributions.

The PERS is a defined benefit plan administered by the New Jersey Division of Pensions and Benefits. Administrative expenses are paid by the System to the State of New Jersey, Department of Treasury. Contributions include funding for basic retirement allowances, cost-of-living adjustments, noncontributory death benefits, and cost of medical premiums after retirement for qualified retirees.

The full normal employee contribution rate is 5% of base salary. However, as a result of special legislation (Chapter 415, P.L. 1999), the employee rate was reduced to 3% of base salary effective January 1, 2000. The rate will remain at 3% for as long as actuarially determined excess valuation assets are available in the PERS.

Employers are required to contribute at an actuarially determined rate. For the year ended June 30, 2001 contributions by the State of New Jersey were limited to funding for post retirement medical benefits while local employer contributions were limited to funding for early retirement incentive benefits. The normal contribution for basic pension benefits, noncontributory death benefits, and cost-of-living adjustments was funded by excess valuation assets in accordance with Chapter 115, P.L. 1997. This legislation provides for actuarially determined excess valuation assets to offset required normal contributions of the State of New Jersey and the local participating employers. Through fiscal year 2002, excess valuation assets may be used to the extent possible to offset normal contributions. Thereafter, a certain percentage of available excess valuation assets may be used as specified in the legislation.

In accordance with the provisions of N.J.S.A. 43:15A, the contribution policy requires State-related employers and the State of New Jersey to contribute at an actuarially determined rate. The actuarial cost

method is projected unit credit. The actuarial assumptions were: investment rate of return 8.75%, salary range 5.95%, cost-of-living adjustments of 2.4%. The asset valuation method is the five year average of market value.

Contributions during the fiscal year 2001 for the PERS amounted to approximately $400 million. The State of New Jersey's annual required contribution and actual contributions were $85,078,620 and $0, respectively.

The PERS had an actuarial accrued liability of $8,538,685,222 as of June 30, 2000. The actuarial value of assets of $9,743,727,383, at June 30, 2000, was in excess of PERS liabilities, resulting in a funding ratio of 114.1%, or $1,205,042,161 in funding excess. Covered payroll for employees under the PERS amounted to $3,094,280,664, which translates into a funding excess of 38.9% of covered payroll.

Retirement benefits for age and service are available at age 60. Employees who retire at the age of 60 are entitled to a retirement benefit determined to be $1/55^{th}$ of the final average salary for each year of service credit. Final average salary equals the average salary for the final three years of service prior to retirement (or the highest three years compensation if other than the final three years). Members may seek early retirement after achieving 25 years of service credit or they may elect deferred retirement after achieving eight to ten years of service credit, in which case, benefits would begin the first day of the month after the member attains normal retirement age.

Financial statements for the State of New Jersey Public Employees' Retirement System are available by contacting the Division of Pensions and Benefits, P.O. Box 295, Trenton, NJ 08625-0295.

3. Litigation

The Program is party to a number of legal actions. Such legal actions involve challenges to loss assessment calculations, reimbursable losses and application of new methodology for prior years. In the opinion of management, the ultimate resolution of these matters will not have an effect on the Program's financial statements because any losses incurred will be reallocated to the member insurance carriers.