## NEW JERSEY INDIVIDUAL HEALTH COVERAGE PROGRAM

P.O. Box 325

[20 West State Street, 11<sup>th</sup> Floor] Trenton, NJ 08625-0325 Phone: (609) 633-1882 x 50306

Fax: (609) 633-2030 E-mail: wsanders@dobi.state.nj.us

## VIA CERTIFIED MAIL

## ADVISORY BULLETIN 04-IHC-03

April 1, 2004

To: IHC Program Members

From: Wardell Sanders, Executive Director

Re: Administrative Assessment for FY2004/FY2005

On March 23, 2004, the IHC Board issued Bulletin No. 04-IHC-02, which included information about an administrative assessment for FY2004/FY2005; provided available information about the 2001/2002 losses filed by carriers seeking reimbursement; and provided notice of the minimum number of "non-group persons" each carrier would have to enroll to be exempt from assessment for 2003/2004 reimbursable losses. Also included in the mailing were an invoice for the administrative assessment and a spreadsheet showing the calculation of the administrative assessment.

While the individual invoices sent to IHC Program members reflected the correct administrative assessment and assignment of minimum number of non-group persons, the spreadsheet included with the Bulletin was not the correct supporting spreadsheet. Enclosed with this Bulletin is each Program member's invoice (with a new date and a new due date for payment) and the correct supporting spreadsheet. Please note that the administrative assessment liability reflected on the invoice has not changed.

If you have any questions, please feel free to contact me.

Wardell Sanders Executive Director