

**BURLINGTON COUNTY INSURANCE COMMISSION  
OPEN MINUTES  
MEETING – March 14, 2022  
TELEPHONIC MEETING  
2:00 PM**

Chair Buono called the meeting to order and read the Open Public Meetings notice into record.

**ROLL CALL OF COMMISSIONERS:**

Ashley Buono, Esq.	Present
Eve A. Cullinan	Present
Damon Burke	Present
Dina Rocco, Esq. (Alternate)	Excused

**FUND PROFESSIONALS PRESENT:**

Executive Director	PERMA Risk Management Services <b>Joseph Hrubash</b>
Claims Services	PMA Management Corp. <b>Jennifer Signs</b>
	Qual Lynx <b>Chris Roselli</b>
	PERMA Risk Management Services <b>Jennifer Conicella</b>
Attorney	Craig Annin Baxter Law <b>Jeffrey S. Craig, Esq.</b>
NJCE Underwriting Manager	Conner Strong & Buckelew <b>Ed Cooney</b>
Treasurer	<b>Edward Troy</b>
Safety Director	J.A. Montgomery Consulting <b>Glenn Prince</b>
Employee Benefits	PERMA Risk Management Services <b>Brandon Lodics</b> <b>Emily Koval</b>
	Conner Strong & Buckelew <b>Diane Peterson</b>
	Amerihealth Administrators <b>Megan Penick</b>
	Express Scripts, Inc. <b>Michael Stahl</b>

**ALSO PRESENT:**

Tom Reilly, J.A. Montgomery  
Bob Gemmell, Brown & Brown  
Joe Henry, Hardenbergh Insurance Group  
Jackie Cardenosa, PERMA Risk Management Services  
Cathy Dodd, PERMA Risk Management Services

**APPROVAL OF MINUTES: OPEN AND CLOSED MINUTES OF FEBRUARY 14, 2022**

**MOTION TO APPROVE OPEN AND CLOSED MINUTES OF FEBRUARY 14, 2022**

Moved:	Commissioner Cullinan
Second:	Commissioner Burke
Vote:	2 Ayes, 0 Nays. 1 Abstention

**CORRESPONDENCE: NONE**

**COMMITTEE REPORTS:**

**SAFETY COMMITTEE:** Mr. Prince reported the Safety Committee last met on January 20 at 10:00 AM via zoom. Mr. Prince advised the next meeting was scheduled for April 21 at 10:00 also via zoom. Mr. Prince said he would coordinate with Mr. Burke for the agenda topics and claims to be discussed at that meeting. Mr. Prince concluded his report unless there were any questions.

**CLAIMS COMMITTEE:** Ms. Conicella reported the Claims Committee did not meet this month, however there was one payment authority request to present in closed session. Ms. Conicella concluded her report unless there were any questions.

**EXECUTIVE DIRECTOR REPORT:** Executive Director advised his report was included in the agenda and he had two action items.

**2022 PLAN OF RISK MANAGEMENT:** Executive Director referred to a copy of a revised Plan of Risk Management which was included in the appendix section of the agenda. Executive Director reported the revised plan added the Active Assailant Coverage for the Burlington County Bridge Commission, Rowan College at Burlington County and Burlington County including the Board of Social Services. Executive Director said the plan was also revised to add the Medical Malpractice Coverage for the Burlington County Special Services School District. Executive Director noted the changes were highlighted. Executive Director asked Mr. Cooney if he had any comments. Mr. Cooney said if anyone had any questions on the Plan of Risk Management, they should reach out to him and thought the best update for the 2022 renewal was the presentation he gave last month to the members of the NJCE.

**MOTION TO APPROVE RESOLUTION 18-22, PLAN OF RISK MANAGEMENT**

Moved:	Chair Buono
Second:	Commissioner Cullinan
Roll Call Vote:	3 Ayes, 0 Nays

**EMPLOYEE DISHONESTY COVERAGE:** Executive Director reported the Employee Dishonesty Coverage with Selective Insurance Company renewed on April 5, 2022. Executive

Director advised the policy covered the positions of Executive Director, Third Party Administrator and Treasurer with a limit per loss of \$1,000,000 with a \$10,000 deductible. Executive Director noted the annual premium was \$1,704 and there was a slight increase in premium of \$18.00. Executive Director noted the premium for the renewal would be paid out of the Miscellaneous and Expense Account and appeared on this month's bill list.

**MOTION TO APPROVE EXPENDITURE FOR EMPLOYEE DISHONESTY COVERAGE IN THE AMOUNT OF \$1,704**

Moved: Chair Buono  
Second: Commissioner Cullinan  
Roll Call Vote: 3 Ayes, 0 Nays

**ESAFETY THREE COURSE PACKAGE TRAINING:** Executive Director reported we received a request from the County to assist in the eSafety Three Course Package Training Program costs for 2022 for the Board of Social Services. Executive Director said the Commission has paid for this course previously. Executive Director advised the package would include 258 users for a total cost of \$2,064. Executive Director noted the expense would be allocated in the 2022 budget under the Miscellaneous and Expense Account and appeared on this month's bill list.

**MOTION TO AUTHORIZE THE COST OF \$2,064 FOR THE ESAFETY THREE COURSE PACKAGE TRAINING PROGRAM FOR 2022 FOR THE BOARD OF SOCIAL SERVICES**

Moved: Chair Buono  
Second: Commissioner Burke  
Roll Call Vote: 3 Ayes, 0 Nays

**CERTIFICATE OF INSURANCE REPORTS:** Executive Director referred to copies of the certificate of insurance issuance reports from the NJCE listing those certificates issued during the month of February which was included in the agenda. Executive Director advised there were (4) four certificates issued during February. In response to Executive Director's inquiry, Mr. Burke advised he did not have any questions on the report.

**MOTION TO APPROVE THE CERTIFICATE OF INSURANCE REPORT**

Moved: Commissioner Burke  
Second: Chair Buono  
Roll Call Vote: 3 Ayes, 0 Nays

**NJ COUNTIES EXCESS JOINT INSURANCE FUND (NJCE):** Executive Director reported the NJCE conducted its Reorganization Meeting on February 24, 2022 and referred to a written summary report of the meeting which was included in the agenda. Executive Director advised the Board of Commissioners renewed certain professional contracts as well as the Origami underwriting data base contract. Executive Director said the NJCE was scheduled to meet again on Thursday, April 28, 2022 at 9:30 AM via Zoom.

**2022 BUDGET DELTA:** Executive Director reported the NJCE Finance Committee met on February 22, 2022 to discuss the 2022 Budget Delta in the amount of \$744,455. Executive Director referred to a copy of the agenda explaining the 2022 Budget Delta and the payment

options for the member Counties and Insurance Commissions. Executive Director advised the Board of Commissioners agreed with the Finance Committee's recommendation to charge an additional assessment. Executive Director said the agenda also included a copy of the Ancillary Coverages Reconciliation to Actual for the members of the Burlington County Insurance Commission. Executive Director reviewed the payment options and advised the Fund Office would confirm the payment option with each member entity. Executive Director asked if anyone had any questions and asked Mr. Cooney to comment. Mr. Cooney explained the challenges in the cyber market especially for public entities noting deductible were increasing at a rapid rate and limits were being reduced. Mr. Cooney said the NJCE Cyber Task Force met last week to discuss further steps and indicated there would be a lot of communication to all members explaining what the current cyber risks are and what controls they were recommending. Mr. Cooney asked if there were any comments or questions, and he would be glad to help any way he can.

Chair Buono said that after the NJCE meeting she did bring this to the attention of her CFO. In response to Chair Buono's comment regarding the payment options, Ms. Dodd advised she would send an e-mail within the next week to ten days to the member entities regarding their preference for the payment options. Executive Director referred to a copy of the breakdown for each member entity and noted the amount due from the County. In response to Executive Director's inquiry, Ms. Dodd said the credit for the College would be applied to their assessment bill.

Commissioner Burke said he knew that Cowbell was meeting with different counties to access the IT Department and asked if they would provide a report basically pointing out potential weaknesses that need to be addressed. Mr. Cooney advised the company would call and discuss key items they noted on the application, do an external security scan of your system, and provide some vulnerabilities and feedback. Mr. Cooney advised they would do a follow up in a month.

**KEY TASKS FOR 2022:** Executive Director referred to a copy of the Key Tasks for 2022 which were included in the agenda. Executive Director said we made strides in providing underwriting information over the past year, however there's still some more work to be done. Executive Director reported we need to take a close look at the Key Tasks and make an effort to continue to obtain the information needed.

**NJCE CYBER TASK FORCE:** Mr. Cooney advised the Task Force issued a story focusing on Third Party Vulnerabilities, which was one of our top 3 causes of claims. Mr. Cooney said the bulletins should be shared with the IT Department. In response to Commissioner Cullinan's inquiry, Mr. Cooney advised the bulletins were included in the agenda and on the website. Mr. Cooney advised they did collect contact information from the IT staff for the Cyber Task Force so he could include them on a distribution list members have experienced. Mr. Cooney said we finished the story of pointing to which NJCE Cyber Program items directly addressed the four claims examples.

**BCIC PROPERTY & CASUALTY FINANCIAL FAST TRACK:** Executive Director reported the December Financial Fast Track was included in the agenda. Executive Director advised as of December 31, 2021 there was a surplus of \$4,220,616. Executive Director referred to line 10 of the report, "Investment in Joint Venture" and indicated \$1,380,774 of the surplus was the BCIC's share of the NJCE equity. Executive Director noted the cash amount was \$6,293,211.

**NJCE PROPERTY & CASUALTY FINANCIAL FAST TRACK:** Executive Director reported the December Financial Fast Track for the NJCE was included in the agenda. As of December 31, 2021 the NJCE had a surplus of \$14,368,342. Executive Director noted the total cash amount was \$30,590,981. Executive Director reported line 7 of the report “Dividend” presented the figure released by the NJCE of \$5,857,551. Executive Director asked if there were any questions on the Financial Fast Tracks.

**CLAIMS TRACKING REPORTS:** Executive Director reported the claims tracking reports as of December 31, 2021 were included in the agenda. Executive Director reviewed the reports with the Commission.

**AVASCI TECHNOLOGY:** Executive Director reported a NJCE Member County was using new technology that combines biomechanical data from motion capture cameras with an artificial intelligence-based movement algorithm to detect falsified or exaggerated injury and workers’ compensation claims. Executive Director advised AvaSci provided a virtual demonstration during the Best Practices Webinar and provided an in-person demonstration to representatives of Gloucester and Cumberland Counties. Commissioner Cullinan suggested scheduling a demonstration for the Commissioners, Labor Counsel and HR Director. Commissioner Cullinan asked Ms. Dodd to reach out to Ms. Kelly of her office to set something up. Executive Director noted PMA was in attendance and they work with Monmouth County. In response to Executive Director’s comment, Ms. Signs provided a brief overview of the success Monmouth County has with AvaSci. Commissioner Cullinan said she would reach out to Ms. O’Conner and mentioned they could not participate in a meeting until the end of April.

**2022 MEETING SCHEDULE:** Executive Director advised the Commission was not scheduled to meet in April and we needed to schedule a meeting for May. Executive Director advised if the Commissioners wanted to meet in person, the Board Room was available on Monday, May 9 at 2:00 PM. Chair Buono agreed to set up an in-person meeting as we have done in the past.

Executive Director's Report Made Part of Minutes

## EXECUTIVE DIRECTOR’S REPORT -BENEFITS

### **FINANCIAL PROCEDURES**

- **Financial Fast Track** – The January 2022 financials will be available at the meeting

Mr. Lodics reviewed the financial fast track through January 31, 2022 which illustrated a profitable month just under \$700,000. The surplus is also very strong with almost 4 months of claims.

**RISK MANAGEMENT PLAN** - At the previous meeting, the Commission agreed to remove the Claim Appeal language from the Risk Management Plan as the process is covered in the member plan document. Mr. Lodics said the fiduciary was not changed in the plan document and removed the prior.

**MOTION TO APPROVE THE RISK MANAGEMENT PLAN, RESOLUTION 19-22, AS OUTLINED.**

Moved: Commissioner Burke  
Second: Commissioner Cullinan  
Roll Call Vote: 3 Ayes, 0 Nays

**Coverage Updates** – Ms. Peterson reviewed the consultant report.

Covid-19 Oral Prescriptions

The Food & Drug Administration has approved two (2) oral antiviral medications for Emergency Use Authorizations (EUA). With an EUA certification, plan sponsors are expected to cover the medications with a \$0 copay. The Government will purchase the medications and distribute them to local pharmacies for adjudication through pharmacy plans (Express Scripts). The approved functions of these medications are to assist in reducing the severity of complications resulting from COVID-19 in individuals who test positive with present symptoms. Today, the medications will require a prescription from a physician for access.

- 1- Pfizer - Paxlovid
- 2- Merck - Molnupiravir

Ms. Peterson said the Government has purchased this drug, but the member will pay filling fees.

Express Scripts has proactively begun updating its adjudication systems to ensure plans meet the expectations of the Federal Government:

Associated Costs:

- o Plan - \$0 Ingredient cost during the period that the medications are purchased by the Federal Government
- o Member - \$0 copay
- o Program Fee - \$2.50 per prescription
- o Dispensing Fee - TBD; additional legislative guidance is needed for local pharmacies

Plan Impact:

- o Addition of medications to covered Formulary
- o Member educational pieces (included in agenda)
- o Quantity Limit – 1 course of treatment every 180 days

**Legislative Review**

At Home COVID-19 Testing- The Biden Administration issued a mandate which became effective January 15<sup>th</sup>, 2022, requiring the coverage of At Home/Over the Counter COVID-19 test kits by Employer-sponsored health plans. Ms. Peterson said that we should have a count by the next meeting of how many the Commission purchased.

Coverage Highlights:

- o Date – Beginning January 15<sup>th</sup>, 2022, going forward
- o Network – Legislation encourages healthcare insurers to develop a network of locations at which the tests can be purchased with \$0 member cost-share at point of service

- Dollar Limit - Up to \$12 per test
- Quantity Limit - Up to 8 tests per individual per 30 days

**ESI Highlights:**

- Point of service option is now available for members to get tests at the pharmacy counter.
- Mail Order options are also available through ESI.
  - Ordering for more than one participant must be done separately.
- ESI will allow up to 8 tests per covered individual per 30 days, regardless of the source used to obtain the kits.
- CSB provided communications for member distribution.

**FREE Tests from the Government**

Effective Tuesday, January 19<sup>th</sup>, anyone may visit [www.COVIDTests.gov](http://www.COVIDTests.gov) and arrange to have four (4) kits mailed to their home at no cost. There is a toll-free number available for those who may not have internet access to request tests, 800-232-0233 (TTY 888-720-7489). The tests should be shipped within seven days from the date of order. Access to free tests should help relieve employers and plan sponsors from absorbing these additional testing costs.

**Compliance**

**Mental Health Parity and Addiction Equality Act (MPAEA)** - In December of 2020, Congress passed the Consolidated Appropriateness Act to Law. The law addresses how the DOL, HHS, and IRS will assess how well plan sponsors and insured plans are keeping up with compliance requirements under MHPAE (passed in 2008).

Plans and plan sponsors will be required to complete a detailed analysis of the benefit plan, confirming compliance.

On behalf of all self-insured groups, Conner Strong & Buckelew is working with our TPA and PBM partners to request assistance for our clients in providing the analysis.

Ms. Peterson said that the County is up to date with copays and design, but the Commission will be reviewing its compliance with quantity and quality.

**Plan Document and SBC Review** - CSB and the County conferenced on the findings of the SBC review in comparison with the 2022 Plan Document. Based on the findings and conference, the following plan clarifications or revisions are necessary:

All Plans

<u>Benefit</u>	<u>AmeriHealth</u>	<u>2022 Plan Document</u>	<u>Comment</u>	<u>Recommendation</u>	<u>Resolution</u>
<b>Out of Network Fee Schedule</b>	250% of Medicare	90% of Fair	AmeriHealth has confirmed that all out of network benefits are paid at 250% of Medicare	Update the 2022 Plan Document to match the AmeriHealth system.	Update the 2022 Plan Document to match the AmeriHealth system.

Plan 2

<u>Benefit</u>	<u>Draft SBC Benefit</u>	<u>2022 Plan Document</u>	<u>Comment</u>	<u>Recommendation</u>	<u>Resolution</u>
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<b>Outpatient Services- Mental Behavioral Health (In-Network)</b>	\$20 copay	\$35 copay	Based on the federal audits on MHPA compliance, it is strongly recommended to align the MH and SA benefits copays with primary care copays.	Update the 2022 Plan Document to match the AmeriHealth SBC and system.	Update the 2022 Plan Document to match the AmeriHealth SBC and system.
<b>Outpatient Services- Substance Abuse (In-Network)</b>	No charge	\$35 copay	See comment above	Update the AmeriHealth system and SBC to charge a Primary Care copay.	Update the AmeriHealth system and SBC to charge a Primary Care copay.

Plan 3

<u>Benefit</u>	<u>Draft SBC Benefit</u>	<u>2022 Plan Document</u>	<u>Comment</u>	<u>Recommendation</u>	<u>Resolution</u>
<b>Urgent Care (Out of Network)</b>	No Charge	20% coinsurance	Urgent care service out of network should follow all other services out of network. Only services for life-threatening emergencies would be covered at the in-network benefit level. These services are usually provided in the ER.	Update the AmeriHealth system and SBC to charge the out-of-network benefit level for all other services.	Update the AmeriHealth system and SBC to charge the out-of-network benefit level for all other services.
<b>Outpatient Services- Mental Health (In Network)</b>	\$20 copay	\$35 copay	Based on the federal audits on MHPA compliance, it is strongly recommended to align the MH and SA benefits copays with primary care copays.	Update the 2022 Plan Document to match the AmeriHealth SBC and system.	Update the 2022 Plan Document to match the AmeriHealth SBC and system.
<b>Therapies: Rehabilitation and Habilitation Services (In-Network)</b>	\$20 copay	\$35 copay	This service should align with specialists visits; however, future services for ABA therapies may follow MHPA compliance (more to come on ABA therapies)	Update the AmeriHealth system and SBC to charge the correct copay.	Update the 2022 Plan Document to match the AmeriHealth SBC and system.

Premier Choice

<u>Benefit</u>	<u>Current SBC Benefit</u>	<u>2022 Plan Document</u>	<u>Comment</u>	<u>Recommendation</u>	<u>Resolution</u>
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<b>Out of Pocket Maximum (Tier 1)</b>	\$0 Indv./ \$0 Fam	\$6,250 Indv./ \$12,500 Fam	The Plan Document followed the original MOOP when ACA was implemented. Plan cannot have a \$0.00 MOOP, or the plan would be 100% with zero copays.	Update the AmeriHealth system and SBC to the Plan Document limits.	Update the AmeriHealth system and SBC to the Plan Document limits.
<b>Home health care (Tier 2 and 3)</b>	No Charge	50% coinsurance after deductible	Cannot determine why Tier 2 and Tier 3 benefits do not align with all other benefits in the same Tiers.	Update the AmeriHealth system and SBC to align with other benefits within the same Tiers.	Update the AmeriHealth system and SBC to align with other benefits within the same Tiers.
<b>Outpatient Services- Substance Abuse (Tier 1)</b>	No Charge	\$20 copay	Based on the federal audits on MHPA compliance, it is strongly recommended to align the MH and SA benefits copays with primary care copays.	Update the AmeriHealth system and SBC to charge a Primary Care copay.	Update the AmeriHealth system and SBC to charge a Primary Care copay.

Ms. Peterson reviewed the plan doc and design differences, in particular the out of network fees. The Plan doc will be updated to reflect what Amerihealth has been processing. She said the County has reviewed the recommendations above, except the therapies which plan document language will stay and change Amerihealth's system copay.

**MOTION TO ACCEPT THE REVISIONS AND/OR CORRECTIONS LISTED IN THE COMPARISON CHART REFLECTING THE DIFFERENCES BETWEEN THE AMERIHEALTH SBC AND THE BURLINGTON COUNTY 2022 PLAN DOCUMENT AND TO BE INCLUDED IN A RESOLUTION RETROACTIVE TO JANUARY 1, 2022 AT THE MAY MEETING**

Moved: Chair Buono  
Second: Commissioner Cullinan  
Vote: 3 Ayes, 0 Nays

**AmeriHealth Administrators**

No Surprise Billing Solution

On July 1<sup>st</sup>, 2021, the Biden-Harris Administration, through the U.S. Departments of Health and Human Services (HHS), Labor, and the Treasury, as well as the Office of Personnel Management, released interim final rules outlining specific requirements related to surprise billing. These rules implement certain provisions of the No Surprises Act, **which is a ban on surprise medical bills effective in 2022** that was enacted as part of the Consolidated Appropriations Act, 2021, signed into law in late 2020.

Solution – Ms. Peterson reviewed the solution below.

AmeriHealth has developed a solution to protect the participants and comply with the Act. AmeriHealth will determine a Qualified Payment Amount (QPA) and negotiate with the provider to accept the QPA. AmeriHealth will handle all settlements/litigation for providers that will not accept the QPA. Today, The County plan holds the participant “harmless” by paying up to the billed amount for the non-elective and/or emergency services.

By implementing the AmeriHealth solution, The County would pay no more than what the payment would be today and, in negotiable cases, save from the billed amount. Conner Strong & Buckelew, in conjunction with AmeriHealth Administrators, recommends implementing AmeriHealth’s “No Surprise Billing” solution.

Ms. Penick said that this will protect the members from out of network balance billing, or emergency out network billing. This will protect the Commission, as well.

**MOTION TO ACCEPT THE CONNER STRONG & BUCKELEW  
RECOMMENDATION TO IMPLEMENT THE AMERIHEALTH “NO SURPRISE  
BILLING” SOLUTION TO BE MEMORIALIZED IN A RESOLUTION AT THE MAY  
MEETING**

Moved: Chair Buono  
Second: Commissioner Cullinan  
Vote: 3 Ayes, 0 Nays

**AMERIHEALTH ADMINSTRATORS** – Ms. Penick reviewed the Amerihealth reports for January included in the agenda.

In response to Mr. Troy, Ms. Penick said that the there is no utilization through MDLIVE, but there is telephonic visits through the provider office. She said the Commission is pay \$0.70 PEPM for the MDLIVE service. She suggestion flyers and additional member letters. She reviewed the program in more detail.

Ms. Peterson said that the MDLIVE was initiated during the shutdown of the Pandemic and to keep it live during the emergency orders. Once we know when the public emergency is lifted, the Commission can consider removing the program.

**EXPRESS SCRIPTS** – Mr. Stahl reviewed the January claims report which was included in the

Benefits Executive Director's Report Made Part of Minutes

**TREASURER REPORT:** Mr. Troy reported the March Bills Lists included in the agenda were for Property & Casualty and Health. Mr. Troy advised he reviewed the resolutions and recommended payment.

**MOTION TO APPROVE RESOLUTION 20-22, MARCH P&C BILLS LIST AND  
RESOLUTION 21-22 MARCH HEALTH BILLS LIST**

Moved: Chair Buono  
Second: Commissioner Burke  
Roll Call Vote: 3 Ayes, 0 Nays

**ATTORNEY:** Mr. Craig advised he did not have anything to report and mentioned it was good to see everyone.

**CLAIMS ADMINISTRATOR:** Ms. Signs advised PMA's monthly reports were included in the appendix section of the agenda. Ms. Signs referred to the WC Claims by Quarter Report valued as of 2/1/22. Ms. Signs reviewed the 2022 claim counts compared to 2021 for each of the member entities. Ms. Signs referred to the Year to Date Containment Savings Report, which was included in the agenda for the period of 1/1/21 to 2/1/22 and advised PMA processed 110 bills in the amount of \$75,133. Ms. Signs said there was a savings applied of \$23,333 and the final paid charges were \$51,800. Ms. Signs also reviewed the WC Claims Frequency and Severity by Location and Top 5 Causes Group by Claims Frequency reports which were included in the agenda. Ms. Signs concluded her report unless there were any questions.

**NJCE SAFETY DIRECTOR:** Mr. Prince advised the February - March 2022 All Risk Control Activity Report was included in the agenda. Mr. Prince reported also incurred in the agenda were all of the virtual training programs through March, however if the employees or departments would like to visit the website, we've actually added up until May. Mr. Prince said all the training opportunities available through J.A. Montgomery Consulting were included on page 50 of the agenda. Mr. Prince referred to a copy of Expo schedule that they were hosting around the state. Mr. Prince said this is a method for all of the employees and departments to attend a full day of training with a variety of essential topics that we normally see in the public works and building and grounds. Mr. Prince noted the registration information to attend any Expo was included in the agenda. Mr. Prince reported Mr. Burke previously asked him to visit the Animal Shelter to discuss a respiratory protection issue and said he had an opportunity to speak with Ms. Haines today and provided her with a variety of templates. Mr. Prince said if she needed assistance he could go back and assist her with developing a written template and program. Mr. Prince reported as he mentioned at the last NJCE meeting they were initiating a County Safety Committee for all of the member to attend. Mr. Prince advised they would meet on a quarterly basis via zoom and he was looking for a representative from Burlington County. Mr. Prince said Mr. Burke does a great job with safety and he was wondering if he would like to participate on the committee. Mr. Burke said he would participate. Mr. Prince concluded his report unless there were any questions. In response to Chair Buono's inquiry, Mr. Prince advised yes he did provide a written template to the Animal Shelter which described the various types of respiratory protection that would be required.

**OLD BUSINESS:** None

**NEW BUSINESS:** None

**PUBLIC COMMENT:** Executive Director asked if there was anyone from the public that wanted to make a comment. There was no one from the public in attendance.

**CLOSED SESSION:** Executive Director read Resolution 22-22, Resolution for Closed Session, and requested a Motion for Executive Session (in accordance with the Open Public Meetings Act, N.J.S.A. 10:4012) to discuss payment authority requests.

**MOTION TO APPROVE PAR AS DISCUSSED IN CLOSED SESSION**

Moved: Commissioner Cullinan  
Second: Commissioner Burke  
Vote: 3 Ayes, 0 Nays

**MOTION TO ADJOURN:**

Moved: Commissioner Burke  
Second: Commissioner Cullinan  
Vote: 3 Ayes, 0 Nays

**MEETING ADJOURNED 2:40 PM**

Minutes prepared by:  
Cathy Dodd, Assisting Secretary  
Emily Koval, Benefitspage