

**ATLANTIC COUNTY INSURANCE COMMISSION  
AGENDA AND REPORTS  
JANUARY 16, 2015**

**STILLWATER BUILDING  
201 SHORE ROAD  
NORTHFIELD, NJ 08225  
11 AM**

**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 Press of Atlantic City**
- II. Filing advance written notice of this meeting with the Commissioners of the Atlantic County Insurance Commission; and**
- III. Posting notice on the Public Bulletin Board in the Atlantic County Office Building**

**ATLANTIC COUNTY INSURANCE COMMISSION  
AGENDA  
OPEN PUBLIC MEETING: JANUARY 16, 2015**

- MEETING CALLED TO ORDER - OPEN PUBLIC MEETING NOTICE READ**
- FLAG SALUTE**
- ROLL CALL OF COMMISSIONERS**
- APPROVAL OF MINUTES: December 29, 2014 Open Minutes.....Appendix I**
  
- CORRESPONDENCE - NONE**
  
- EXECUTIVE DIRECTOR/ADMINISTRATOR - PERMA  
Executive Directors Report.....Page 1**
  
- CLAIMS SERVICES – Conner Strong & Buckelew  
Monthly Report.....Verbal**
  
- CEL SAFETY DIRECTOR – JA Montgomery Risk Control  
Monthly Report.....Verbal**
  
- CLAIMS SERVICE – Qual Lynx**
  
- OLD BUSINESS**
- NEW BUSINESS**
- PUBLIC COMMENT**

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- MEETING ADJOURNMENT  
NEXT SCHEDULED MEETING: February 13, 2015 11 AM**

**ATLANTIC COUNTY INSURANCE COMMISSION**

9 Campus Drive, Suite 16  
Parsippany, NJ 07054  
*Telephone (201) 881-7632*  
*Fax (201) 881-7633*

Date: January 16, 2015  
Memo to: Commissioners of the Atlantic County Insurance Commission  
From: PERMA Risk Management Services  
Subject: Executive Director's Report

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- 2015 Property and Casualty Budget – (Page 3)** At the December 29<sup>th</sup> meeting of the Fund, the 2015 Property and Casualty Budget was introduced. In accordance with the regulations, the budget was advertised in the Commission’s official newspapers. The 2015 budget has changed since its introduction to reflect (1) a change in professional fees per RFP pricing and (2) reflect the CEL property adjustments and added flood coverage.

The revised 2015 budget amount is \$7,843,969 which represents an increase of \$18,809 or 0.24%. The Public Hearing for the budget will be held at this meeting. Also included in the agenda on page 4 is a copy of the revised assessments by member entity.

In accordance with the Commission’s By Laws, the assessment bills will be mailed to the member entities via certified mail and e-mail. The annual assessment would be billed in 3 installments and payable as follows: 40% on 2/15/15, 30% on 6/15/15 and 30% on 9/15/15. However, as to Atlantic County, the minimum assessment to be paid by the County in calendar year 2015 will be \$2,847,239. The 2015 Atlantic County Assessment balance of \$3,276,428 will be carried as a receivable and will be paid by the County in future fund years per an agreement between the County’s financial officials and financial officials of PERMA Risk Management Services, the Commission’s Executive Director.

- Motion to open the Public Hearing on the 2015 Property & Casualty Budget**
- Discussion of Budget and Assessments**
- Motion to close the Public Hearing**
- Motion to adopt the Property & Casualty Budget for the Atlantic County Insurance Commission as presented for the Commission Year 2015 & Certify the 2015 Assessments**

- ❑ **Certificate of Insurance Request Form (Page 5)** – The New Jersey Counties Excess Joint Insurance Fund has set up an email address and developed a Certificate of Insurance Request Form for its members to request certificates of insurance as the need arises. The email address for requesting certificates of insurance is [NJCECertRequest@connerstrong.com](mailto:NJCECertRequest@connerstrong.com). Requests can also be made by fax at 856-685-2230. If you need to discuss a specific request or have a question on the procedure to request certificates please contact Cathy Dodd at 973-659-6410 or [cdodd@connerstrong.com](mailto:cdodd@connerstrong.com).
  
- ❑ **Proposed Meeting Dates for 2015 (Page 6)** – Attached on page 6 is a copy of the 2015 proposed annual meeting dates for review and discussion. The meetings will occur on the second Friday of the month.

❑ **Motion to Approve Meeting Schedule**

<b>ATLANTIC COUNTY INSURANCE COMMISSION</b>					
<b>2015 PROPOSED BUDGET</b>					
			<b>Amended - Introduced</b>		
		<b>FY2015</b>	<b>AMENDED</b>	<b>Change</b>	
<b>APPROPRIATIONS</b>		<b>INTRODUCED</b>	<b>FY2015</b>	<b>\$</b>	<b>%</b>
<b>I. Claims and Excess Insurance</b>		<b>BUDGET*</b>	<b>BUDGET</b>		
<b>Claims</b>					
1	Property	183,929	183,929	0	0.00%
2	Liability	314,525	314,525	0	0.00%
3	Auto	213,038	213,038	0	0.00%
4	Workers' Comp.	4,748,320	4,748,320	0	0.00%
5					
6	<b>Subtotal - Claims</b>	<b>5,459,812</b>	<b>5,459,812</b>	<b>0</b>	<b>0.00%</b>
7					
8	<b>Premiums</b>				
9	CEL JIF	1,132,939	1,152,944	20,005	1.77%
10					
11	<b>SubTotal Premiums</b>	<b>1,132,939</b>	<b>1,152,944</b>	<b>20,005</b>	<b>1.77%</b>
12	<b>Total Loss Fund</b>	<b>6,592,751</b>	<b>6,612,756</b>	<b>20,005</b>	<b>0.30%</b>
13					
14	<b>II. Expenses, Fees &amp; Contingency</b>				
15					
16	Claims Adjustment	218,392	280,000	61,608	28.21%
17	Safety Director	0	0	0	0.00%
18	General Expense				
19	Exec. Director	146,659	120,000	(26,659)	-18.18%
20	Actuary	24,986	24,986	0	0.00%
21	Auditor	18,661	18,661	0	0.00%
22	Attorney	18,289	18,289	0	0.00%
23	Treasurer	8,238	8,238	0	0.00%
24	Secretary	0	5,000	5,000	100.00%
25					
26	Misc. Expense & Contingency	29,331	29,331	0	0.00%
27					
28	<b>Total Fund Exp &amp; Contingency</b>	<b>464,556</b>	<b>504,505</b>	<b>39,949</b>	<b>8.60%</b>
29	Risk Managers	246,500	200,000	(46,500)	-18.86%
30					
31					
32	XS JIF Ancillary Coverage				
33	POL/EPL	237,104	237,104	0	0.00%
34	XS POL/EPL	0	0	0	0.00%
35	Excess Liability	88,437	88,437	0	0.00%
36	Crime Program	30,000	37,240	7,240	24.13%
37	Medical Malpractice	120,236	120,236	0	0.00%
38	Pollution Liability	20,000	20,000	0	0.00%
39	Employed Lawyers Liab	0	0	0	0.00%
40	Cyber Liability/Special Coverages	0	0	0	0.00%
41	XS Flood	25,576	23,692	(1,884)	-7.37%
42					
43	<b>Total FUND Disbursements</b>	<b>7,825,160</b>	<b>7,843,969</b>	<b>18,809</b>	<b>0.24%</b>
<b>* Managed Care fee for Qual Lynx is capped at \$190,000 and is included in the Loss Funds</b>					

<b>ATLANTIC COUNTY INSURANCE COMMISSION</b>								
<b>2015 PROPOSED ASSESSMENTS -</b>								
	Assessments by Line							
Member Name	Property	Liability	Auto	Workers' Comp.	NJC	E&C	RMC	Total
Atlantic County	79,793	247,250	161,000	3,918,160	1,148,403	407,148	161,405	6,123,159
Atlantic County Utility Authority	100,000	63,250	51,750	826,487	481,032	96,237	38,151	1,656,907
Atlantic County Improvement Authority	4,136	4,025	288	3,673	50,217	1,120	444	63,903
Grand Totals:	183,929.00	314,525.00	213,038.00	4,748,320.00	1,679,652.34	504,505.00	200,000.00	7,843,969.34

ATLANTIC COUNTY INSURANCE COMMISSION  
CERTIFICATE REQUEST FORM

Name of Commission Member Entity

- Atlantic County
- Atlantic County Utilities Authority
- Atlantic County Improvement Authority

Date of Request: \_\_\_\_\_

Requested By (individual from member Entity):  
\_\_\_\_\_

Telephone #: \_\_\_\_\_

Facsimile #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of Outside Organization Requesting Certificate: \_\_\_\_\_

Address of the Outside Organization: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COVERAGES AND LIMITS REQUESTED (standard coverages and limits are pre-selected)

Coverage: (X)

**Limits:** (if optional limits are to be shown)

<input checked="" type="checkbox"/> General Liability	\$250,000
<input checked="" type="checkbox"/> Auto Liability	\$250,000
<input type="checkbox"/> Auto Physical Damage	_____
<input checked="" type="checkbox"/> Excess Liability	\$5,500,000
<input type="checkbox"/> Property	_____
<input checked="" type="checkbox"/> Workers Compensation	Statutory/\$5,750,000 (if applicable)
<input type="checkbox"/> Public Officials Liability	_____
<input type="checkbox"/> Crime / Fidelity Bond	_____

DESCRIPTION: (include purpose of certificate, additional insured, loss payees, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

ANY ADDITIONAL INFORMATION NECESSARY TO ISSUE THIS CERTIFICATE SHOULD BE ATTACHED TO THIS FORM.

NOTE: PLEASE ALLOW THREE (3)  
BUSINESS DAYS FOR PROCESSING

1/1/12

**E Mail to:**  
**NJCECertRequest@connerstrong.com**  
**Or**  
**Fax to:**  
**856-685-2230**  
**Attn: NJCE Certificate Request Unit**  
**Conner Strong**

**ATLANTIC COUNTY INSURANCE COMMISSION  
9 CAMPUS DRIVE, SUITE 16  
PARSIPPANY, NJ 07054**

TO: Members of the Commission

**2015 PROPOSED ANNUAL MEETING NOTICE**

Pursuant to Chapter 231, Laws of 1975, known as the Open Public Meeting Acts, the following have been designated as meeting dates of the Atlantic County Insurance Commission at which the business of said Commission may be formally discussed, decided or acted upon.

<u>TIME</u>	<u>DATE</u>	<u>LOCATION</u>	<u>PURPOSE</u>
11:00 AM	February 13, 2015	Atlantic County StillWater Building 201Shore Road Northfield, NJ 08225	Regular Meeting
11:00 AM	March 13, 2015	“ “	Regular Meeting
11:00 AM	April 10, 2015	“ “	Regular Meeting
11:00 AM	May 8, 2015	“ “	Regular Meeting
11:00 AM	June 12, 2015	“ “	Regular Meeting
11:00 AM	July 9, 2015	“ “	Regular Meeting
11:00 AM	September 10, 2015	“ “	Regular Meeting
11:00 AM	October 8, 2015	“ “	Regular Meeting
11:00 AM	November 13, 2015	“ “	Regular Meeting
11:00 AM	December 10, 2015	“ “	Regular Meeting
11:00 AM	January 8, 2016	“ “	Regular Meeting

In addition, such other meetings as may be required shall be scheduled and held but pursuant to and with such additional notice as may be required by statute.

**By: PERMA Risk Management Services  
Administrator  
ATLANTIC COUNTY INSURANCE COMMISSION**