

WALL TOWNSHIP PUBLIC SCHOOLS
OFFICE OF THE BUSINESS ADMINISTRATOR/BOARD SECRETARY
PO Box 1199
Wall, New Jersey 07719-1199

Brian J. Smyth
Custodian of Records

Phone: 732-556-2016
FAX: 732-556-2102

April 15, 2024

Betsy Cross

Re: OPRA 24-097

opra+request-60031-f380a1a5@requests.opramachine.com

Good afternoon,

The Wall Township Board of Education is in receipt of your request dated March 27, 2024, wherein you requested records as follows:

“Records requested under OPRA.

Please refer to what you sent me on March 17, 2023. OPRA 23-130B.

2023 - 2024 Budget vs. actual account (Health Benefits).”

In response to your request, attached please find HEALTH BENEFITS BUDGET VS ACTUAL 2023-24, dated April 9, 2024, consisting of 1 page.

If your request for access to a government record has been denied or unfilled within the seven (7) business days required by law, you have a right to challenge the decision by the Wall Township Board of Education to deny access. At your option, you may either institute a proceeding in the Superior Court of New Jersey or file a complaint with the Government Records Council (GRC) by completing the Denial of Access Complaint Form. You may contact the GRC by toll-free telephone at 866-850-0511, by mail at P.O. Box 819, Trenton, NJ 08625, be-mail at grc@dca.state.nj.us, or at their web site at www.state.nj.us/grc. The GRC can also answer other questions about the law. All questions regarding complaints filed in Superior Court should be directed to the Court Clerk in your County.

Sincerely,



Brian J. Smyth
Records Custodian

BJS/dc

2023-24 BUDGET VS ACTUAL ACCOUNT # 11-000291-270-001 (HEALTH BENEFITS)

	DETAIL DESC	23-24 BUDGET	JULY	AUGUST	SEPT	OCT	NOV	DEC	JAN	FEB	MARCH	APRIL	MAY	JUNE	YTD	BUDGET VARIANCE YTD
1	A4 TAX	\$ 190,000.00	\$ 14,124.50	\$ 20,485.73	\$ 16,753.43	\$ 11,481.83	\$ 14,241.39	\$ 17,616.23	\$ 13,054.93	\$ 8,202.54					\$ 115,960.58	\$ 74,039.42
2	ACA PCORI	\$ 4,135.00	\$ 3,710.70												\$ 3,710.70	\$ 424.30
3	ADVANCE MED/RX DEPOSIT	\$ -													\$ -	\$ -
4	COBRA ADMIN	\$ 3,800.00													\$ -	\$ 3,800.00
5	COBRA REFUNDS	\$ -	\$ (4,017.37)	\$ (7,055.39)	\$ (1,943.26)	\$ (1,910.96)	\$ (1,910.96)	\$ (2,072.46)	\$ (5,233.72)	\$ (2,478.93)	\$ (2,361.88)				\$ (28,984.93)	\$ 28,984.93
6	FLAGSHIP	\$ 6,059.04	\$ 6,059.04	\$ 7,300.12	\$ 6,585.85	\$ 6,134.19	\$ 7,001.40	\$ 6,755.20	\$ 6,679.58	\$ 5,477.61	\$ 7,019.11					
7	PPO	\$ 35,933.21	\$ 35,933.21	\$ 35,625.18	\$ 36,241.14	\$ 35,604.83	\$ 36,471.57	\$ 37,429.56	\$ 35,848.86	\$ 35,218.64	\$ 36,386.97					
8	DENTAL CLAIMS (EMP)	\$ 545,370.00	\$ 41,992.25	\$ 42,925.30	\$ 42,826.99	\$ 41,739.02	\$ 43,472.97	\$ 44,184.76	\$ 42,528.44	\$ 40,696.25	\$ 43,406.08				\$ 383,772.06	\$ 161,597.94
9	DENTAL CLAIMS (RET)	\$ 3,175.00	\$ 190.47	\$ 190.47	\$ 190.47	\$ 190.47	\$ 190.47	\$ 190.47	\$ 190.47	\$ 190.47	\$ 190.47				\$ 1,714.23	\$ 1,460.77
10	DEPENDENT 31 REFUNDS	\$ -													\$ -	\$ -
11	EMPLOYEE HB	\$ (2,000,000.00)	\$ (41,050.21)	\$ (40,107.76)	\$ (230,796.87)	\$ (299,713.49)	\$ (228,760.20)	\$ (227,265.12)	\$ (227,341.94)	\$ (229,380.63)	\$ (230,699.06)				\$ (1,755,115.28)	\$ (244,884.72)
12	EMPLOYEE DENTAL PURCH PD				\$ (2,026.14)	\$ (2,152.35)	\$ (2,517.60)	\$ (2,143.20)	\$ (2,094.32)	\$ (2,059.36)	\$ (2,059.36)					
13	BILLING	\$ (106.16)	\$ (106.16)	\$ (106.16)	\$ (144.26)	\$ (182.36)	\$ (182.36)	\$ (182.36)	\$ (182.36)	\$ (182.36)	\$ (182.36)					
14	EMPLOYEE DENTAL PURCH TOTAL	\$ (27,000.00)	\$ (106.16)	\$ (106.16)	\$ (2,170.40)	\$ (2,334.71)	\$ (2,699.96)	\$ (2,325.56)	\$ (2,276.68)	\$ (2,241.72)	\$ (2,241.72)				\$ (16,503.07)	\$ (10,496.93)
15	EMPLOYEE MED/RX PURCH PD				\$ (11,622.57)	\$ (10,783.10)	\$ (9,182.94)	\$ (9,182.94)	\$ (9,182.94)	\$ (9,182.94)	\$ (9,182.94)					
16	BILLING	\$ (2,115.14)	\$ (2,115.14)	\$ (2,115.14)	\$ (2,954.61)	\$ (3,794.08)	\$ (3,794.08)	\$ (3,794.08)	\$ (3,794.08)	\$ (3,794.08)	\$ (3,794.08)					
17	EMPLOYEE MED/RX PURCH TOTAL	\$ (240,000.00)	\$ (2,115.14)	\$ (2,115.14)	\$ (14,577.18)	\$ (14,577.18)	\$ (12,977.02)	\$ (12,977.02)	\$ (12,977.02)	\$ (12,977.02)	\$ (12,977.02)				\$ (98,269.74)	\$ (141,730.26)
18	EMPLOYEE LOA REFUND	\$ -														
19	EXPECTED MED/RX CLAIMS JAN - JUNE	\$ 6,665,625.00							\$ 886,487.22	\$ 745,872.56	\$ 898,587.72				\$ 2,530,947.50	\$ 4,134,677.50
20	EXPECTED MED/RX CLAIMS JULY - DEC	\$ 6,665,625.00	\$ 1,074,403.53	\$ 1,225,407.83	\$ 1,063,816.61	\$ 819,310.81	\$ 647,459.14	\$ 1,098,742.36							\$ 5,929,140.28	\$ 736,484.72
21	EXPECTED CLAIMS INCREASE -CH 44 & NEGOTIATIONS	\$ -	\$ -													
22	FOOD SERVICE BILLED	\$ (107,350.00)			\$ (10,401.04)	\$ (10,401.04)	\$ (10,401.04)	\$ (10,401.04)	\$ (10,401.04)	\$ (9,531.24)	\$ (9,531.24)				\$ (71,067.68)	\$ (36,282.32)
23	FSA ADMIN	\$ 4,650.00	\$ 175.00	\$ 217.00	\$ 203.00	\$ 217.00	\$ 217.00	\$ 301.00	\$ 301.00	\$ 301.00	\$ 287.00				\$ 2,219.00	\$ 2,431.00
24	HB CONSULTING FEE	\$ 55,000.00	\$ 4,583.33	\$ 4,583.33	\$ 4,583.33	\$ 4,583.33	\$ 4,583.33	\$ 4,583.33	\$ 4,583.33	\$ 4,583.33	\$ 4,583.33				\$ 41,249.97	\$ 13,750.03
25	HB BSWIFT EMPLOYEE BENEFIT ADMIN SYSTEM	\$ -							\$ 47,890.06						\$ 47,890.06	\$ (47,890.06)
26	HB REMEDY ANALYTICS PHARMACY CONSULTING SVCS	\$ -								\$ 58,275.45	\$ 22,267.95				\$ 80,543.40	\$ 80,543.40
27	MEDICARE PART B PENSIONS	\$ 20,502.00	\$ 718.38	\$ 718.38	\$ 718.38	\$ 728.38	\$ 718.38	\$ 718.38	\$ 767.68	\$ 767.68					\$ 5,855.64	\$ 14,646.36
28	MEDICARE PART B	\$ 5,950.00			\$ 1,484.10			\$ 1,484.10			\$ 1,572.30				\$ 4,540.50	\$ 1,409.50
29	MERP	\$ 14,500.00			\$ 2,656.96		\$ 2,897.84		\$ 685.99						\$ 6,240.79	\$ 8,259.21
30	SBHP	\$ 4,100.00	\$ 339.47	\$ 339.47	\$ 339.47	\$ 339.47	\$ 339.47	\$ 364.12	\$ 364.12	\$ 364.12	\$ 364.12				\$ 3,153.83	\$ 946.17
31	STOP LOSS JAN-JUNE	\$ 565,000.00							\$ 98,948.96	\$ 95,322.32					\$ 194,271.28	\$ 370,728.72
32	STOP LOSS JULY - DEC	\$ 565,000.00	\$ 85,717.62	\$ 84,403.94	\$ 86,210.25	\$ 86,374.46	\$ 86,374.46	\$ 87,359.72							\$ 516,440.45	\$ 48,559.55
33	TENURE SINGLE TO F,MS,PC	\$ 153,000.00													\$ 153,000.00	\$ -
34	TPA	\$ 273,375.00	\$ 25,551.51	\$ 31,051.24	\$ 24,249.48	\$ 26,829.44	\$ 26,596.41	\$ 26,038.78	\$ 31,953.08	\$ 24,975.74					\$ 217,245.68	\$ 56,129.32
35	WRAP PROGRAM BILLED	\$ (13,500.00)			\$ (1,260.75)	\$ (1,260.75)	\$ (1,260.75)	\$ (1,260.75)	\$ (1,260.75)	\$ (1,260.75)	\$ (1,260.75)				\$ (8,825.25)	\$ (4,674.75)
36																
37																
38	MONTHLY TOTAL	\$ 13,350,957.00	\$ 1,204,217.88	\$ 1,360,938.24	\$ 982,882.97	\$ 661,596.08	\$ 569,080.93	\$ 1,025,281.30	\$ 868,264.13	\$ 663,405.72	\$ 689,919.35	\$ -	\$ -	\$ -	\$ 8,025,586.60	\$ 5,325,370.40
	2023-24 Approved Budget 11-000-291-270-001	\$ 13,350,957.00													\$ 8,025,586.60	
	HBClaims as of 3/24/24														Sum of Monthly Totals: \$ 8,025,586.60	\$ 13,350,957.00
															Check on Original Budget:	\$ 13,350,957.00