

From: Les Nedman <opra+request-92838-523fbfdb@requests.opramachine.com>
Sent: Wednesday, July 1, 2026 9:13 AM
To: Jill Abernathy
Subject: RE: OPRA request - Health Benefits

Warning: Unusual sender <opra+request-92838-523fbfdb@requests.opramachine.com>

You don't usually receive emails from this address.
Make sure you trust this sender before taking any actions.

Dear Jill Abernathy,

Re Howell Township,

Pursuant to the New Jersey Open Public Records Act, N.J.S.A. 47:1A-1 et seq. ("OPRA"), the undersigned hereby requests access to and copies of the following government records maintained by Howell Township (the "Municipality") relating to its employee health insurance program. This request covers the current plan year and the immediately preceding two (2) plan years.

RECORDS REQUESTED

Please provide the following records in electronic format (PDF, Excel, or CSV as applicable) to the extent they exist and are maintained by the Municipality, its broker, its carrier, or any third-party administrator acting on its behalf:

1. All health insurance premium invoices and billing statements for the current plan year and the prior two (2) plan years, including any monthly premium registers broken out by coverage tier (employee only, employee + spouse, employee + child(ren), family).
2. All Summary of Benefits and Coverage (SBC) documents provided to employees for each health plan option offered in the current plan year and the prior two (2) plan years.
3. Monthly and annual claims reports for the current plan year and the prior two (2) plan years, including but not limited to: paid claims by month, large claimant reports (including any specific stop-loss or laser thresholds applied), claims by category (medical, pharmacy, behavioral health), and any carrier-issued utilization reports.
4. All enrollment data and census reports reflecting the number of covered lives by month and by plan tier for the current plan year and the prior two (2) plan years.
5. Any rate renewal notices, actuarial analyses, or carrier rate justification documents received for each plan renewal period within the scope of this request.
6. All plan documents, Summary Plan Descriptions (SPD), and carrier or TPA administrative agreements currently in effect or in effect during the prior two (2) plan years.
7. Any stop-loss or reinsurance policy documents, including specific and aggregate attachment points, premiums paid, and claims recovered, for the current plan year and the prior two (2) plan years.
8. All correspondence between the municipality and its health insurance carrier(s), broker(s), or third-party administrator(s) relating to premium negotiations, rate increases, plan design changes, or open enrollment communications for the current plan year and the prior two (2) plan years.
9. Any monthly or quarterly reporting provided by the carrier or TPA to the municipality, including loss ratio reports, trend analyses, and member cost-sharing summaries.

10. A copy of any broker of record letter(s), producer of record designation(s), or consulting agreements in effect during the period covered by this request, including any commission, fee, or compensation disclosure documents.

FORMAT AND FEE WAIVER

The undersigned requests that all responsive records be provided in electronic format via email or secure file transfer. If any records are available only in paper format, please advise prior to production so that arrangements can be made.

If a fee is required for duplication or retrieval, please provide a cost estimate in advance. If the anticipated fee exceeds \$25.00, please notify the requestor before processing so that the scope of the request may be discussed.

REDACTIONS AND WITHHOLDING

If any portion of a responsive record is withheld, please identify the specific statutory exemption relied upon pursuant to N.J.S.A. 47:1A-5(g) and provide any reasonably segregable non-exempt portions. Please note that the names and compensation of public employees are not exempt from disclosure under OPRA. See *Asbury Park Press v. Ocean County Prosecutor's Office*, 374 N.J. Super. 312 (App. Div. 2005).

RESPONSE DEADLINE

OPRA requires a response within seven (7) business days of receipt of this request. N.J.S.A. 47:1A-5(i). If additional time is needed due to the volume or nature of the request, please provide written notice within seven (7) business days specifying the anticipated date of production.

This Opra request is for Howell Twp. I certify that I haven't been convicted of an indictable offense, will not be used for commercial purpose and this isn't in connection of a legal proceeding.

Yours Truly,

-----Original Message-----

Good morning,

Your OPRA request below has been refused. Although you are not required to use the official form, pursuant to N.J.S.A. 47:1A-5(f) it is necessary to provide all of the information on the form in your request. I have attached a copy of the OPRA request form for your review. Specifically, you need to have the three certification items and the answers to those certifications in your request.

Additionally your request is asking for Lakewood Township documents.

Thank you.

Jill Abernathy
Office of the Municipal Clerk
Township of Howell
4567 Route 9 North, 2nd Floor
Howell, NJ 07731
732-938-4500 ext. 2241

Please use this UNIQUE email address for all replies to this request and no other:
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View this OPRA request & responses online:

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Please note that in some cases publication of requests and responses will be delayed.

If you find this service useful as an OPRA custodian, please ask your web manager to link to us from your organisation's website.
