



State Health Benefits Program (SHBP) & School Employees' Health Benefits Program (SEHBP)
RESOLUTION: Terminate Participation in SHBP/SEHBP

To be completed by the employing agency's Certifying Officer.

A resolution to terminate all participation under the SHBP and SEHBP (including prescription drug plan and/or dental plan coverage).

BE IT RESOLVED:

- 1. The Somerset Raritan Valley Sewerage Authority 134900 hereby resolves to terminate its participation in the Program...
2. We shall notify all active employees of the date of their termination of coverage under the Program.
3. We understand that the New Jersey Division of Pensions & Benefits (NJDPB) will notify retired employees of the cancellation of their coverage.
4. We understand that all COBRA participants will be notified by the NJDPB and advised to contact our office concerning a possible alternative health, prescription drug, and dental insurance plan.
5. We understand that this resolution shall take effect the first of the month following a 60-day period beginning with the receipt of the resolution by the State Health Benefits Commission or School Employees' Health Benefits Commission.

I hereby certify that the foregoing is a true and correct copy of a resolution duly adopted by the:

Somerset Raritan Valley Sewerage Authority (732) 469-0593
50 Polhemus Lane Bridgewater NJ 08807
Ronald S. Anastasio Executive Director ronald.anastasio@srvsa.org
Signature Date 10/31/25
40/27 enrolled 02-30630



State Health Benefits Program (SHBP) & School Employees' Health Benefits Program (SEHBP) **RESOLUTION: Terminate Participation in SHBP/SEHBP**

Please complete and comply with the following:

Type of funding method with the new contract:

Conventionally insured _____

Minimum premium _____

Administrative Services Only (ASO) _____

Other (please list) _NJ Solutions JHIF_____

New Health Carrier __Horizon BCBNJ_____

New Prescription Drug Carrier _____Prime Therapeutics_____

New Dental Plan Carrier _____Delta Dental_____

Reason for termination from the SHBP/SEHBP _____Cost_____

In accordance with N.J.S.A. 18A:16-21 and 40A:10-25, you must file a copy of your new contract with the State Health Benefits Commission or School Employees' Health Benefits Commission. Please submit a copy of the new contract with this completed resolution.

Mail Completed Resolution to:

**New Jersey Division of Pensions & Benefits
Health Benefits Bureau
P.O. Box 299
Trenton, NJ 08625-0299**

Or Email:

Your Designated NJDPB Health Benefits Group Email Box found on the Resources & Support page in your Benefitsolver Administrator account.

**RESOLUTION TO TERMINATE PARTICIPATIN IN
SHBP/SEHBP**

BE IT RESOLVED that this resolution shall take effect upon its passage.

Upon a Motion of Mr. Murphy, Second of Mr. Lifrieri, the resolution was approved by the following roll call vote:

Roll Call Vote:

Robert Albano	Yes	Joseph Lifrieri	Yes
Pamela Borek	Yes	John Murphy	Yes
Daniel Croson	Absent	Michael Pappas	Absent
Gary DiNardo	Absent	Philip Petrone	Absent
Vincent Dominach	Yes	Reinhard Pratt	Yes
Michael Impellizeri	Yes	Frank Scarantino	Yes
		Edward Machala	Yes

CERTIFICATION

I, RONALD S. ANASTASIO, Executive Director and Certifying Agent of The Somerset Raritan Valley Sewerage Authority, **HEREBY CERTIFY** that the foregoing is a true copy of a Resolution adopted at a Regular Meeting of the Authority held on the 31st day of October 2025, as the same appears on record in the Minute Book of the Authority.

IN WITNESS WHEREOF I have hereunto set my hand and affix the Seal of the Authority this 31st day of October 2025.



Ronald S. Anastasio, P.E.
Executive Director

RSA/lmh

**A RESOLUTION OF THE SOMERSET RARITAN VALLEY
SEWERAGE AUTHORITY AUTHORIZING THE
SOMERSET RARITAN VALLEY SEWERAGE
AUTHORITY TO JOIN THE NJ SOLUTIONS JOINT
HEALTH INSURANCE FUND**

WHEREAS, a number of public entities in the State of New Jersey have joined together to form the NJ Solutions Joint Health Insurance Fund, hereafter referred to as the “Fund”, as permitted by N.J.A.C. 11:15-3.1 et. seq., N.J.S.A. 17:1-8.1 et. seq., and N.J.S.A. 40A:10-36 et. seq.; and

WHEREAS, the Fund was approved to become operational by the Department of Banking and Insurance and the Department of Community Affairs (collectively, the “Departments”) and has been operational since that date; and

WHEREAS, the statutes and regulations governing the creation and operation of a joint insurance fund in the State of New Jersey contain certain restrictions and safeguards in connection with the administration of the public interest entrusted to such a Fund; and

WHEREAS, the governing body of the Somerset Raritan Valley Sewerage Authority, hereinafter referred to as “Local Unit” has studied the feasibility of joining the Fund and has determined that membership in the Fund is in the best interest of the Local Unit.

NOW, THEREFORE, BE IT RESOLVED that the governing body of the Local Unit hereby agrees and authorizes the following:

- i. Execution of the application for membership to the Fund, including any and all documents and/or certifications as may be necessary, in order for the Local Unit to complete the application process and join the Fund.
- ii. The Local Unit shall become a member of the Fund for an initial period outlined in the Local Unit’s Indemnity and Trust Agreement, subject to the approval of the Fund Commissioners, which in no event shall exceed three (3) years as prescribed in N.J.A.C. 11:15-3.3(a).
- iii. The Local Unit shall participate in the following type(s) of coverage(s) offered by the Fund: Health Insurance and/or Prescription Insurance and/or Dental Insurance and/or Medicare Advantage/Employer Group Waiver Program as defined pursuant to N.J.S.A. 17B:17-4, the Fund’s Bylaws, and Plan of Risk Management.
- iv. Adoption and approval of the Fund’s Bylaws, a true and correct copy of which is annexed hereto as Attachment A, which has been approved by the Departments.
- v. Execution of the Local Unit’s Indemnity and Trust Agreement, a true and correct copy of which is annexed hereto as Attachment B, which has been approved by the Departments.

BE IT FURTHER RESOLVED that the governing body of the Local Unit certifies, pursuant to N.J.A.C. 11:15-3.3(a), that the Local Unit has never defaulted on claims under a self-insured

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plan and that it has not had its insurance canceled for nonpayment of premium for a period of at least two (2) years prior to this application.

BE IT FURTHER RESOLVED that the governing body of the Local Unit is authorized and directed to execute the Indemnity and Trust Agreement and such other documents signifying membership in the Fund as required by the Fund's Bylaws, and to deliver these documents to the Fund's Executive Director with the express reservation that these documents shall become effective only upon on acceptance of the Fund's By-laws as prescribed in N.J.A.C. 11:15-3.3(a).

BE IT FURTHER RESOLVED that this resolution shall take effect upon its passage.

Upon a Motion of Mr. Scarantino, Second of Ms. Borek, the resolution was approved by the following roll call vote:

Roll Call Vote:

Robert Albano	Yes	Joseph Lifrieri	Yes
Pamela Borek	Yes	John Murphy	Yes
Daniel Croson	Absent	Michael Pappas	Absent
Gary DiNardo	Absent	Philip Petrone	Absent
Vincent Dominach	Yes	Reinhard Pratt	Yes
Michael Impellizeri	Yes	Frank Scarantino	Yes
		Edward Machala	Yes

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Ronald S. Anastasio, P.E.
Executive Director

RSA/lmh