

**NEW HAMPSHIRE SCHOOL HEALTH  
CARE COALITION**

**FINANCIAL STATEMENTS  
JUNE 30, 2022 AND 2021**

NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION

JUNE 30, 2022 AND 2021

TABLE OF CONTENTS

	<u>Page(s)</u>
Independent Auditor's Report .....	1 - 3
Management's Discussion and Analysis .....	4 - 14
Financial Statements:	
Statements of Net Position.....	15
Statements of Revenues, Expenses and Changes in Net Position.....	16
Statements of Cash Flows .....	17
Notes to the Financial Statements.....	18 - 31
Required Supplementary Information:	
Schedule 1 - Reconciliation of Claims Liabilities by Type of Contract.....	32
Schedule 2 - Comparative Schedule of Claim Development, Earned Assessments and Unallocated Expenses .....	33 - 34
INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF THE BASIC FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH <i>GOVERNMENT AUDITING STANDARDS</i> .....	35

## INDEPENDENT AUDITOR'S REPORT

The Board of Directors  
New Hampshire School Health Care Coalition

**Report on the Audit of the Financial Statements*****Opinion***

We have audited the financial statements of the New Hampshire School Health Care Coalition (the Coalition), as of and for the years ended June 30, 2022 and 2021, and the related notes to the financial statements, which collectively comprise the Coalition's basic financial statements as listed in the table of contents.

In our opinion, the accompanying financial statements referred to above present fairly, in all material respects, the financial position of the Coalition, as of June 30, 2022 and 2021, and the changes in financial position and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

***Basis for Opinion***

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards (Government Auditing Standards)*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Coalition, and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

***Responsibilities of Management for the Financial Statements***

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Coalition's ability to continue as a going concern for twelve months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

## ***Auditor's Responsibilities for the Audit of the Financial Statements***

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS and *Government Auditing Standards*, we

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Coalition's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Coalition's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

### ***Required Supplementary Information***

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis and Schedules 1 and 2 be presented to supplement the basic financial statements. Such information is the responsibility of management and, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

### **Other Reporting Required by *Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated October 20, 2022, on our consideration of the Coalition's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Coalition's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Coalition's internal control over financial reporting and compliance.

  
Crowe LLP

West Hartford, Connecticut  
October 20, 2022

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
JUNE 30, 2022**

The New Hampshire School Health Care Coalition (the Coalition), a public entity risk pool, presents the following overview and analysis of its financial operations for the fiscal year ended June 30, 2022, to be reviewed and considered in conjunction with the more detailed statements, schedules, and notes in this report.

**Financial Highlights:**

- Assets exceeded liabilities and deferred inflows of resources by \$28,322,362 at June 30, 2022; this net position consisted of the Coalition's investment in property and equipment of \$365,362 and the unrestricted amounts for the medical contingent reserve of \$27,178,000 and the dental contingent reserve of \$779,000. The Coalition did not retain any unrestricted or undesignated surplus.
- The Coalition has reported a liability at June 30, 2022 of \$12,585,758 described as a premium holiday payable in accordance with guidance from the New Hampshire Secretary of State, Bureau of Securities Regulation (BSR). Premium holiday credits totaling \$10,831,066 were paid to former Members in June 2022 or applied to Member contribution invoices as of July 1, 2022. Current Member groups also have the option of receiving premium holiday credits via invoice credits or checks. The remaining premium holiday payable of \$1,973,545 is the surplus at June 30, 2022 to be applied to Member contribution invoices as of July 1, 2023. If a group terminates before July 2023, their premium holiday is paid out via check. Of the \$1,973,545, \$1,480,609 represents a medical premium holiday and \$492,936 represents a dental premium holiday.
- The Coalition has adopted additional reporting guidance of the Governmental Accounting Standards Board (GASB), including this management discussion and analysis; expanded note disclosure for investments; and separate sections on the Statement of Net Position for any deferred outflows or deferred inflows of resources.

**Overview of the Financial Statements:**

The Coalition's fiscal year is July 1 through June 30.

The annual financial report consists of three parts:

- Management's Discussion and Analysis
- Financial Statements and Note Disclosures
- Required Supplementary Information

Management's discussion and analysis provides a narrative overview of the statements and comments on significant developments during the reporting period. The intention is to present a financial summary of operations for the past fiscal year and discuss the outlook for the ensuing year.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
JUNE 30, 2022**

The Statements of Net Position contain information regarding the assets and liabilities of the Coalition. The Coalition reports in accordance with GASB Statement No. 65 which requires deferred outflows of resources and deferred inflows of resources to be reported in separate sections of the Statement of Net Position. The Coalition has not reported any deferred outflows but does report deferred revenue as a deferred inflow.

The Statements of Revenues, Expenses and Changes in Net Position show the operating activities for the year, revenues and expenses. As required by the GASB, investment income is considered non-operating revenue. The net result of operations for the fiscal year is the change in net position from year to year.

The Statements of Cash Flows report the cash flow resulting from operating, investing and financing activities of the Coalition showing how the financial resources were used during the course of the year.

Notes to the Financial Statements provide explanations of the accounting principles followed and of key items in the financial statements. They include tables with more detailed analysis of certain accounts.

The Required Supplementary Information includes the ten-year schedule of claims development and a three-year comparative reconciliation of claims liabilities.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
JUNE 30, 2022**

**Analysis of Financial Information Presented in the Statements:**

Statements of Net Position:

The following table summarizes the Statements of Net Position:

	<u>June 30, 2022</u>	<u>June 30, 2021</u>	Percentage Change	<u>June 30, 2020</u>	Percentage Change
Cash and cash equivalents	\$ 12,363,690	\$ 20,321,815	-39%	\$ 28,085,628	-28%
Investments	38,256,070	44,120,867	-13%	41,051,142	7%
Other assets	<u>7,412,996</u>	<u>5,468,514</u>	36%	<u>4,899,811</u>	12%
<b>Total assets</b>	<u>58,032,756</u>	<u>69,911,196</u>	-17%	<u>74,036,581</u>	-6%
Claims payable	2,650,127	2,502,680	6%	2,754,931	-9%
Claims reserves	12,358,573	11,082,874	12%	10,992,954	1%
Premium holiday payable	12,585,758	23,754,534	-47%	24,926,502	-5%
Premium deficiency reserve	-	2,391,482		3,916,051	
Other liabilities	<u>1,369,916</u>	<u>1,500,968</u>	-9%	<u>1,900,727</u>	-21%
<b>Total liabilities</b>	<u>28,964,374</u>	<u>41,232,537</u>	-30%	<u>44,491,164</u>	-7%
Deferred inflows of resources	<u>746,020</u>	<u>681,450</u>	9%	<u>851,058</u>	-20%
Net position:					
Invested in capital assets	365,362	380,210	-4%	402,358	-6%
Unrestricted	<u>27,957,000</u>	<u>27,617,000</u>	1%	<u>28,292,000</u>	-2%
<b>Total net position</b>	<u>\$ 28,322,362</u>	<u>\$ 27,997,210</u>	1%	<u>\$ 28,694,358</u>	-2%

Total assets for FY2022, FY2021, and FY2020 are \$58,032,756, \$69,911,196, and \$74,036,581 respectively. The decrease in assets from FY2021 to FY2022 is primarily because of decreased cash balances due to higher than anticipated claims experience in the latter part of the year due to the COVID-19 pandemic. It is also due to unrealized financial statement losses from declining market value of investments. The decrease in assets from FY2020 to FY2021 is also primarily attributed to a decreased cash balance due to higher than anticipated claims.

Total liabilities for FY2022, FY2021, and FY2020, are \$28,964,374, \$41,232,537 and \$44,491,164 respectively. The decrease in liabilities from FY2022 and FY2021 is largely due to both a decrease in premium holiday payable and elimination of the premium deficiency reserve. The decrease in liabilities from FY2020 to FY2021 is due to a decrease in the premium deficiency reserve and a decrease in premium holiday year over year.

Unrestricted net position increased over the prior year by \$298,000 in the medical contingent reserve and \$42,000 in the dental contingent reserve. The increase in medical contingent reserve was calculated using a 7.6% melded



**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
JUNE 30, 2022**

trend for projected 2022-23 claims. This trend was consistent with the trend in the prior year and recent claims experience. The increase in dental contingent reserve was calculated by considering an estimated two months of projected 2022-23 claims.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
JUNE 30, 2022**

Statements of Revenues, Expenses and Changes in Net Position:

The following table summarizes the Statements of Revenues, Expenses and Changes in Net Position:

	<u>June 30, 2022</u>	<u>June 30, 2021</u>	Percentage Change	<u>June 30, 2020</u>	Percentage Change
Operating revenues:					
Member contributions	\$ 209,240,411	\$ 202,167,690	3%	\$ 195,565,845	3%
Other	<u>10,545,825</u>	<u>9,044,801</u>	17%	<u>6,184,105</u>	46%
Total operating revenues	<u>219,786,236</u>	<u>211,212,491</u>	4%	<u>201,749,950</u>	5%
Operating expenses:					
Claims expense	185,806,441	175,821,838	6%	156,292,633	12%
Insurance premiums	19,069,962	17,900,988	7%	17,221,056	4%
Claims administration	5,235,783	5,132,741	2%	5,080,260	1%
Self-insured pool assessments	1,641,165	1,354,921	21%	901,011	0%
Health and wellness benefits	2,808,455	3,029,185	-7%	3,070,376	-1%
Administration	2,135,730	2,080,572	3%	2,183,822	-5%
Premium deficiency (gain) expense	(2,391,482)	(1,524,569)	57%	3,916,051	0%
Other	<u>45,000</u>	<u>43,406</u>	4%	<u>442,857</u>	-90%
Total operating expenses	<u>214,351,054</u>	<u>203,839,082</u>	5%	<u>189,108,065</u>	8%
Operating gain	5,435,182	7,373,409	-26%	12,641,885	-42%
Nonoperating revenues:					
Premium holiday credits	(1,973,545)	(10,831,066)	-82%	(13,138,415)	-18%
Earnings on investments	<u>(3,136,485)</u>	<u>2,760,509</u>	-214%	<u>2,422,453</u>	14%
Change in net position	325,152	(697,148)	-147%	1,925,923	-136%
Beginning net position, July 1	<u>27,997,210</u>	<u>28,694,358</u>	-2%	<u>26,768,436</u>	7%
Ending net position, June 30	<u>\$ 28,322,362</u>	<u>\$ 27,997,210</u>	1%	<u>\$ 28,694,358</u>	-2%

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
JUNE 30, 2022**

Revenues - Total operating revenues for FY2022, FY2021, and FY2020, were \$219,786,236, \$211,212,491 and \$201,749,950 respectively. The increase in Member contributions from FY2021 to FY2022 is mostly attributable to a 5.5% rate increase in the medical plan and growth in ancillary product participation such as life, disability, and vision. The increase in Member contributions from FY2020 to FY2021 is mostly attributable to a 5.1% rate increase in the medical plan and growth in ancillary.

Expenses - Total operating expenses for FY2022, FY2021, and FY2020 were \$214,351,054, \$203,839,082 and \$189,108,065 respectively. For FY2022 and FY2021, operating expenses increased largely due to increased claims utilization towards the latter part of each year respectively. For FY2022 the self-insured pool assessments increased due to a full year's worth of assessment fees for the NHHP Reinsurance Program. The NHHP Reinsurance Program fee began as of January 1, 2021. For 2021 and 2022, there was an increase in the insurance line item to account for premiums paid to ancillary programs to Mutual of Omaha and VSP Vision.

**Other matters:**

Investment Portfolio

The Coalition engages Strategic Asset Alliance (SAA) as an investment consultant and advisor to the Board and organization. Asset Allocation and Management Company (AAM) provides investment management and accounting services. US Bank acts as the custodian of Coalition funds.

The Coalition's investment portfolio on June 30, 2022 was valued at \$38,256,070. The June 30, 2021 value of the investment portfolio was \$44,120,867. The June 30, 2020 value of the investment portfolio was \$41,051,142. The Coalition's Risk Pool Practices Agreement with the NH Secretary of State expired as of April 25, 2017. Although the agreement is no longer in effect, operations and policies adopted as a result of its execution remain in place. The Coalition's investments are compliant with the requirements imposed upon municipalities pursuant to NH RSA 35:9, with the exception of an aggregate amount of 5.34% which is compliant with RSA 402:28. This aggregate amount includes the Coalition's cash, cash equivalents, and other non-REIT investments. The Coalition held securities that are non-compliant with NH RSA 35:9 in the amount of \$2,701,911 at June 30, 2022, \$371,534 at June 30, 2021, and \$53,249 at June 30, 2020. The increase in these securities is mostly attributable to investment in high yield bonds to further diversify the portfolio.

There remains one (1) Real Estate Investment Trust (REIT) in the Coalition's portfolio as of June 2022. The REIT balance was \$55,393 at June 30, 2022, \$53,483 at June 30, 2021 and \$68,764 at June 30, 2020. The Coalition temporarily retains the non-compliant investment and intends to liquidate as soon as practicable to do so without incurring penalties or breakage fees.

Capital Assets and Debt

The Coalition's property and equipment at June 30, 2022 was valued at \$365,362 compared to \$380,210 at June 30, 2021 and \$402,358 at June 30, 2020. The change at June 30, 2022 was due to a depreciation amount of \$22,670 and an increase of \$7,823 in capital assets. The Coalition has no long-term debt.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
JUNE 30, 2022**

**Outlook / Economic Factors:**

Fiscal year 2022 began with some normalization in utilization trends for health care and consumers. As operations returned to more in person meetings, Coalition Staff utilized all opportunities to reconnect with its Member groups and Participants while continuously reaffirming the Organization's mission statement to provide education and training for employees and employers to become informed health consumers with healthier life styles, and enable the purchase of quality health care in a cost-effective manner in a continuously and rapidly changing environment. Staff continued to monitor COVID-19 throughout the plan year including the Omicron surge in January 2022. In the spring, claims reports showed an uptick in utilization as more individuals sought care after the surge. Staff delivered presentations and group meetings both in person and virtually and continues to do so. With more virtual opportunities, comes more choices for Member groups and Participants to stay connected both now and in the future. Choice is important to the Coalition as it creates more touchpoints for education.

The Coalition experienced an increase in overall claims costs in the second half of the plan year as a result of increased utilization, similar to FY2021. By contrast, preventive care visits and screenings decreased with Participants utilizing the emergency room at a higher percentage. Staff believes this is due to both convenience in terms of immediate availability as well as increased COVID-19 testing through the surge and year as a whole. Specialist visits and well visits decreased too. Many doctors retired during the pandemic and in some cases, there was a lengthy wait for available appointments due to this decrease in providers. In the coming year, Staff will re-emphasizing the importance of preventive screenings and visits. In addition, during the pandemic, many turned to virtual care as that may have been the only option for immediate care. Staff will educate on virtual care still being available today. Virtual care is a viable option to augment care until an appointment becomes available with a chosen provider, as a behavioral health option, or simply as a convenience for those who wish to speak to a provider from the comfort of their own home. Staff and consultants continue to monitor claims and utilization closely to analyze. Consultants, actuaries, and Staff agree that although there was an increase in utilization particularly after the surge, claims are not showing the high spikes and low valleys seen during the pandemic and are normalizing to a certain extent.

In response to the COVID-19 pandemic, the Coalition adjusted its medical coverages to ensure Membership well-being and peace of mind. The Coalition through Cigna waived cost sharing for both COVID-19 testing as well as treatment regardless of whether for in or out-of-network services. The Coalition also extended diagnostic visits/testing through the end of the national public health emergency. In addition to these services, virtual care and resources through MDLive are still very much available to Participants. Holistic health continues to be the driver behind keeping Coalition Participants happy and healthy. The holistic approach to health includes both mental health as well as wellness programs. 36% of Participants are living with a behavioral health diagnosis. The Coalition recognizes the impacts that the pandemic has had both on mental and physical health and provides mental health resources as part of its communication strategy. These mental health resources include both in-person and virtual support for Participants and their households. The top presenting condition for Participants is stress and anxiety with various associated comorbidities. The connection between mental health and overall quality of life is tremendous and the importance of mental health will be an ongoing focus for years to come. The Coalition also continues to support its Membership through its fully integrated *Good for You!* Well-Being Program. This program is offered to Participants on myCigna.com to encourage self-care, stress management and holistic health management. FY2022 saw a participation rate of 50.5% compared to 54% in FY2021. The decrease was largely due to lack of onsite events.

The Coalition's Board of Directors, Staff and Key Stakeholders continued executing on a shorter-range organizational Strategic Plan. Keeping in mind the current environment as well as Member needs today, all

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
JUNE 30, 2022**

involved agreed that a shorter-range strategic plan was appropriate to provide for both an organized plan as well as nimbleness as the external environment continues to change rapidly. This plan includes examining offering targeted programs for the Coalition's top conditions including musculoskeletal and cancer as well as the use of centers of excellence, second opinion programs and other solutions that may improve the Participant experience and reduce barriers to care. Staff and Board are also beginning to discuss a longer-term plan for the next three to five years. While the current plan has been key in a time of rapid change, both Board and Staff agree that a shift back to longer range planning will be appropriate once current executables are completed.

SchoolCare's primary strategic goal is ongoing commitment to improving the quality of care for all covered Participants, expanding benefits where possible and reducing costs over the long term. To accomplish these goals, a number of value-added programs have been added to coverage. The first new program launched in November 2021, Hinge Health, a digital end-to-end platform designed to assist with musculoskeletal issues. The program offers wearable technology, exercises, and virtual visits with physical therapists to address problem areas. Hinge Health has been well received by Participants for both its use of technology and its convenience for home access. In the Spring of 2022, SchoolCare launched a six-month pilot program through Cigna called DayTwo. This program is a diabetes nutrition program for those diagnosed with type 2 diabetes that uses gut microbiome profiling for precision nutrition as well as continuous glucose monitoring. The purpose of this program is to educate the Participant on how they as an individual respond to different foods and how that can affect their glucose levels and gut microbiomes. The program also includes nutritional check ins. Most recently on July 27, 2022 the Board unanimously approved a new retiree health plan option beginning January 1, 2023 after much research, vetting and discussion. In partnership with United Healthcare, retirees will be offered a custom, group Medicare Advantage plan that is estimated to save retirees approximately \$3 million collectively through reduced premiums and out-of-pocket costs. The plan also offers enhanced benefit such as coverage for vision exams and hearing aids as well as a retiree-focused wellness program.

In the coming months and years, the Coalition will continue to execute on its strategic plan and be responsive to Member needs as they arise allowing for quick transitions as needed while always keeping its mission front and center. Upcoming goals include the inclusion of a benefit administration platform, Board succession planning and other program/opportunities to target large claims drivers such as preventive care, and cancer care, etc. The Coalition remains strong financially and well positioned to support Member groups and Participants now and in the future.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
JUNE 30, 2022**

Membership

The exceptional service to our existing Membership is a cornerstone of the Coalition's mission. The Coalition's Membership in medical and dental plans remained relatively flat in FY22. Staff continues to service current Members to the highest standard possible while marketing to prospective clients through educational opportunities and events. These opportunities have now shifted to hybrid formats and Staff has modeled either live or recorded presentations as well as in person opportunities to meet Member's needs.

Membership Services

The Coalition offers many administrative services to its Member groups to provide flexibility, education, convenience and time saving options through expert Coalition Staff:

- Retiree Administration Services - Member groups are provided with this service option which offers Retiree medical and dental billing administration, collecting payments and coordination with the New Hampshire Retirement System. Coalition Staff also assist both Members and individual retirees with any questions or concerns they may have regarding coverage or claims.
- COBRA Administration Services - The Coalition administers various required COBRA notices along with issuance of invoices and collection of COBRA payments on its Members behalf. In addition, the Coalition Staff has three (3) certified COBRA administrators knowledgeable in the intricacies and regulations of the law.
- Dependent Benefit Protection – In the unfortunate instance of an employee's death, the Coalition provides extended medical and dental benefits at no cost to dependents of the employee for the first twelve (12) months of COBRA continuation coverage, no matter the cause of death. As of June 30, 2022, 3 individuals were covered for medical benefits.
- Onsite Services – Benefit education is offered through the Coalition to Member groups through various onsite events and presentations. In addition, the Coalition provides various value-added services including but not limited to biometric screenings, flu shot clinics and Employee Assistance Program seminars all in an effort to support holistic health.
- Claims Advocates – One of the key differentiators between the Coalition and traditional insurance products is having key advocates when the need arises. If a Participant is experiencing issues with claims payments or approvals in general, Coalition staff may act as an advocate on behalf of a Participant to resolve related issues. Knowledgeable staff help to navigate Participants through the sometimes-confusing world of health care through both education and solutions.

Patient Protection and Affordable Care Act (PPACA)

The Patient Protection and Affordable Care Act also referred to as health care reform continues to affect both the Coalition's operations and its Membership, although to a lesser extent than in the past. Staff regularly monitors, educates and assists Members with the implementation of changes required by PPACA. All Coalition medical plans are in compliance with health care reform provisions. In addition to this, Coalition staff continues to assist Members with various reporting requirements under PPACA including 6055 and 6056 reporting

Although PPACA continues to be monitored by Staff, there are few fees and upcoming deadlines remaining. The Excise Tax previously scheduled for a 2022 start was repealed on December 20, 2019. From an administrative perspective, the Coalition paid the Comparative Effectiveness Research PPACA fee on its Members behalf during the fiscal year. The Comparative Effectiveness Research fee was originally expected to sunset with a final

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
JUNE 30, 2022**

payment date of July 31, 2020. The fee has been extended through June 30, 2029 for fiscal year health plans such as SchoolCare with a final payment date of July 31, 2030.

Medical Costs

Medical cost trends had stabilized in recent years mostly due to a large Membership population on the Consumer Driven Plan products. An average trend projection in the northeast for the coming year is around 7-8%. There are still many unknowns as to the effect of delayed services such as preventive care on health and costs in years to come as well as mental health and long-term effects. Now more than ever, consumerism will be key for both Participants as well as Staff communications. 80% of SchoolCare's population is enrolled in a consumer driven plan as of 2022. SchoolCare continues to work with employers and employees to educate and identify alternative options/locations for care that may provide cost savings. Staff also will support any employer efforts for quotes on lower cost plans and cost/benefit analysis as needed.

As part of the Coalition's mission statement, the organization believes that education of its Member groups is of the utmost importance to train and inform Members and Participants of cost saving alternatives and options. With the large shift to Consumer Driven Plans over the years, the Coalition believes that education must continue each year to empower each Participant to be their own health advocate. As such, Staff continues to deliver quality materials via news articles, Facebook live events and webinars while supporting cost containment measures at the local level whenever possible. Staff has also compiled annual detailed claim reports in conjunction with Cigna to be sure Members understand the primary drivers behind medical costs each year.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
JUNE 30, 2022**

Regulatory environment

The Coalition is a pooled risk management program under RSA 5-B and as such is regulated by the New Hampshire Secretary of State, Bureau of Securities (BSR). The Coalition staff provides periodic updates to the BSR on Coalition operations as they become available and promptly responds to all inquiries/request for information.

**Requests for Information:**

For additional information, please contact the New Hampshire School Health Care Coalition, 370 Harvey Road, Manchester, NH 03103; telephone 603-836-5031 x304.



**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
STATEMENTS OF NET POSITION  
FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

	June 30, 2022	June 30, 2021
<b>ASSETS:</b>		
Cash and cash equivalents	12,363,690	\$ 20,321,815
Investments	38,256,070	44,120,867
Member receivables	3,692,136	2,318,852
Accounts receivable	3,165,933	2,563,828
Accrued interest receivable	154,705	158,191
Prepaid expenses	34,860	47,433
Total current assets	57,667,394	69,530,986
 Property and equipment, net	 365,362	 380,210
Total assets	 \$ 58,032,756	 \$ 69,911,196
<b>LIABILITIES, DEFERRED INFLOWS OF RESOURCES AND NET POSITION</b>		
<b>LIABILITIES:</b>		
Accounts payable	\$ 1,155,380	\$ 1,306,978
Accrued expenses	214,536	193,990
Claims payable	2,650,127	2,502,680
Claims reserves	12,358,573	11,082,874
Premium deficiency reserve	-	2,391,482
Premium holiday payable	12,585,758	23,754,534
Total current liabilities	28,964,374	41,232,537
 <b>DEFERRED INFLOWS OF RESOURCES:</b>		
Deferred revenue	746,020	681,450
 <b>NET POSITION:</b>		
Invested in capital assets	365,362	380,210
Unrestricted	27,957,000	27,617,000
Total net position	28,322,362	27,997,210
Total liabilities, deferred inflows of resources and net position	 \$ 58,032,756	 \$ 69,911,196

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION**  
**STATEMENTS OF REVENUE, EXPENSES AND CHANGES IN NET POSITION**  
**FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

	<u>June 30, 2022</u>	<u>June 30, 2021</u>
Operating revenues:		
Member contributions	\$ 209,240,411	\$ 202,167,690
Other income	10,545,825	9,044,801
Total operating revenues	<u>219,786,236</u>	<u>211,212,491</u>
Operating expenses:		
Claims expense	185,806,441	175,821,838
Insurance stop-loss	4,236,624	3,120,755
Insurance premiums	14,833,338	14,780,233
Claims administration	5,235,783	5,132,741
Contractual services	530,440	618,664
Affordable Care Act fees	45,000	43,406
Self-insured pool assessments	1,641,165	1,354,921
Administration	1,600,314	1,454,592
Premium deficiency gain	(2,391,482)	(1,524,569)
Health and wellness benefits	2,808,455	3,029,185
Conference expenses	4,976	7,316
Total operating expenses	<u>214,351,054</u>	<u>203,839,082</u>
Operating gain	5,435,182	7,373,409
Nonoperating revenues:		
Premium holiday credits	(1,973,545)	(10,831,066)
Earnings on investments	<u>(3,136,485)</u>	<u>2,760,509</u>
Change in net position	325,152	(697,148)
Beginning net position, July 1	<u>27,997,210</u>	<u>28,694,358</u>
Ending net position, June 30	<u>\$ 28,322,362</u>	<u>\$ 27,997,210</u>

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
STATEMENTS OF CASH FLOWS  
FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

	June 30, 2022	June 30, 2021
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>		
Receipts from members	\$ 194,789,377	\$ 190,403,992
Subsidies and refund received	9,943,720	8,059,298
Payments to suppliers	(27,383,072)	(27,275,242)
Payments of claims	(186,774,777)	(177,508,738)
Payments to employees	(1,257,349)	(1,141,264)
Net cash and cash equivalents used in operating activities	(10,682,101)	(7,461,954)
<b>CASH FLOWS FROM CAPITAL FINANCING ACTIVITIES:</b>		
Purchase of property and equipment	(7,822)	-
Net cash and cash equivalents used in capital and financing activities	(7,822)	-
<b>CASH FLOWS FROM INVESTING ACTIVITIES:</b>		
Proceeds from maturities and sales, net of purchases	1,715,116	(1,415,627)
Interest and dividend income	1,016,682	1,113,768
Net cash and cash equivalents provided by (used in) investing activities	2,731,798	(301,859)
<b>NET DECREASE IN CASH AND CASH EQUIVALENTS</b>	(7,958,125)	(7,763,813)
<b>CASH AND CASH EQUIVALENTS, beginning of year</b>	20,321,815	28,085,628
<b>CASH AND CASH EQUIVALENTS, end of year</b>	\$ 12,363,690	\$ 20,321,815
<b>RECONCILIATION OF OPERATING INCOME TO NET CASH USED IN OPERATING ACTIVITIES:</b>		
Operating income	\$ 5,435,182	\$ 7,373,408
Adjustments to reconcile operating income to net cash and cash equivalents used in operating activities -		
Depreciation expense	22,670	22,149
Premium holiday credit	(1,973,545)	(10,831,066)
(Increase) decrease in assets:		
Member receivables	(1,373,284)	408,945
Accounts receivable	(602,105)	(985,503)
Prepaid expenses	12,573	(21,652)
(Decrease) increase in liabilities:		
Accounts payable	(151,598)	(22,074)
Claims payable	147,447	(252,251)
Premium deficiency reserve	(2,391,482)	(1,524,569)
Accrued expenses	20,546	(377,686)
Claims reserves	1,275,699	89,920
Premium holiday payable	(11,168,776)	(1,171,968)
Increase (decrease) in deferred revenue:	64,570	(169,608)
Total adjustments	(16,117,283)	(14,835,362)
Net cash and cash equivalents used in operating activities	\$ (10,682,101)	\$ (7,461,954)
<b>SUPPLEMENTAL NON-CASH DISCLOSURE</b>		
Change in unrealized loss on investments	\$ (4,516,257)	\$ 1,125,361

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**1. Organization and significant accounting policies:**

- A. Organization and reporting entity - The New Hampshire School Health Care Coalition (the Coalition), was created in 1995 as a non-profit, tax-exempt corporation. The Coalition is a cooperative service organization of political subdivisions authorized by the New Hampshire General Court to establish and operate one or more pooled risk management programs under the requirements of New Hampshire RSA Chapter 5-B for the benefit of political subdivisions of the State of New Hampshire. Its mission is to provide education and training for public employees and employers to become informed health consumers with healthier life styles, and enable the purchase of quality health care in a cost effective manner. The Coalition was founded by the New Hampshire School Boards Association, the New Hampshire Association of School Business Officials, the New Hampshire School Administrators Association, the New Hampshire School Boards Insurance Trust, and the National Education Association-New Hampshire.

Prior to July 1, 2003, the Coalition entered into agreements with insurers to fully insure HMO, POS, indemnity, and Medicare supplement health benefit options, collectively known as the SchoolCare Plan (SchoolCare), and accordingly, the insurance risks were not retained by the Coalition under these plans. The Coalition provided prescription drug coverage to retired Members on Medicare under a self-funded arrangement beginning on July 1, 2002.

Beginning July 1, 2003, the Coalition entered into a self-insured arrangement with Connecticut General Life for the HMO and POS health benefit options. Connecticut General provides complete claims administration services and management reports.

Beginning July 1, 2010, the Coalition entered into a fully-insured arrangement with Connecticut General Life for DPO (dental provider organization) dental benefit options. The dental program transitioned to a self-insured arrangement on July 1, 2013.

Beginning July 1, 2011, the Coalition entered into an updated self-funded arrangement with Cigna Health and Life Insurance Company (formally Connecticut General Life) for both health benefit and dental benefit options.

Beginning January 1, 2014, the Coalition transitioned its existing SchoolCare 65+ prescription plan from self-funded to a fully insured Medicare Part D Employer Group Waiver Program (EGWP) with Express Scripts.

Beginning July 1, 2019, the Coalition began offering fully insured life, long term disability and short-term disability plans in partnership with Mutual of Omaha. The Coalition also began offering a hardware only, voluntary vision plan in partnership with VSP Vision.

Effective January 1, 2023, the Coalition entered into a fully insured arrangement with United Healthcare to provide a Medicare Advantage Prescription Drug Plan (MAPD) to its 65+ retiree population.

- B. Membership - Membership is limited to political subdivisions of the State of New Hampshire. Membership was 90 at June 30, 2022 and 92 at June 30, 2021.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**1. Organization and significant accounting policies (continued):**

- C. Basis of accounting - The accompanying financial statements have been prepared in accordance with U.S. generally accepted accounting principles (GAAP) as applied to proprietary funds of governmental units. The Coalition meets the requirements as a public entity risk pool under Governmental Accounting Standards Board (GASB) statements, and accounts for its activities in accordance with the applicable statements.
- D. Cash and cash equivalents - The Coalition considers all deposit accounts with banks and money market accounts held by the Coalition's investment advisor in the Coalition's name to be cash and cash equivalents. The Coalition's accounts are insured or collateralized at June 30, 2022 and June 30, 2021.
- E. Investments - The Coalition accounts for its investments in accordance with GASB Statement No. 31, Accounting and Financial Reporting for Certain Investments and for External Investment Pools (Statement No. 31). Statement No. 31 establishes fair value standards on accounting for all investments held by governmental external investment pools and governmental entities. All investment income, including changes in the fair value of investments, is recognized in the statements of revenues, expenses, and changes in net position. Realized gains and losses on the sale of investments are recognized on the specific identification basis to determine the costs of the investments sold. Realized gains and losses on investments that had been held for more than one year and sold in the current year were included as a change in the fair value of investments reported in the prior years and the current year. Investment purchases are recognized on the trade date. Investments are stated at fair value based on quoted market prices or through a recognized pricing service.

In accordance with GASB Statement No. 40, Deposit and Investment Risk Disclosures – an amendment of GASB Statement No. 3, certain disclosures regarding deposit and investment risks have been provided in Note 2, Investments.

The Coalition measures its investments in accordance with GASB Statement No. 72, Fair Value Measurements and Application (Statement No. 72), which defines fair value, provides a framework for measuring fair value and requires certain disclosures about fair value measurements. The definition of fair value under Statement No. 72 focuses on the price that would be received to sell the asset, which is referred to as the exit price. Statement No. 72 provides guidance on how to measure fair value, when required, under existing accounting standards. Statement No. 72 establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value into broad levels as follows:

Level 1 - Quoted prices (unadjusted) in active markets for identical assets or liabilities.

Level 2 - Inputs - other than quoted prices - included within Level 1 that are observable for the asset or liability, either directly or indirectly. Level 2 inputs include:

- Quoted prices for similar assets or liabilities in active markets
- Quoted prices for identical or similar assets or liabilities in markets that are not active
- Inputs other than quoted prices that are observable for the asset or liability, such as:
  - (1) Interest rates and yield curves observable at commonly quoted intervals
  - (2) Implied volatilities
  - (3) Credit spreads
- Market-corroborated inputs.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**1. Organization and significant accounting policies (continued):**

Level 3 - Inputs are unobservable inputs, such as management's assumption of the default rate among underlying mortgages of a mortgage-backed security.

The Coalition has recorded its investments at fair value, as more fully described in Note 2.

The fair values of investments are measured using quoted market prices or dealer quotations, when available. When quoted market prices are not available, fair value is measured using quoted market prices for similar securities.

- F. Property and equipment - Property and equipment are stated at cost and depreciated using the straight-line method over their estimated useful lives. On January 14, 2012 the Board adopted a formal policy, Capitalization for the Acquisition, Management and Disposition of Fixed Assets. The following is the guideline on how each type of fixed asset should be depreciated:

	<u>Minimum Capitalized Cost</u>	<u>Estimated Useful Life</u>
Office furniture and equipment	\$ -	7 years
Computer equipment	\$ -	5 years
Computer software	\$ -	10 years
computer - other equipment	\$ -	5 years
Buildings and improvements	All purchase costs	30 years
Building equipment	All purchase costs	20 years
Vehicles	All purchase costs	5 years

- G. Member contributions - Member contributions are based on the program experience and trends as determined by qualified actuaries and are set by the Board annually. The contributions cover all expenses of the Coalition including claims payments and administration, reserves, stop-loss insurance, health and wellness programs, and the Coalition's administration. The rates are effective through June 30, 2022.
- H. Net position - The Coalition reports two classifications of net position, invested in capital assets and unrestricted. Unrestricted net position is defined as that portion of net position that is intended to be used by the Coalition for specific purposes as authorized by the Board of Directors. Undesignated net position would be the residual classification of net position and would include all amounts not otherwise restricted or designated. The Coalition does not report an undesignated net position. Residual amounts are reported as premium holiday payable as the Coalition is required to return any undesignated amount to Members. Upon dissolution of the organization, the net position is to be distributed to Members.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**1. Organization and significant accounting policies (continued):**

The following table represents the components of the net position:

	2022	2021
Invested in capital assets	\$ 365,362	\$ 380,210
Unrestricted - medical contingent reserve	27,178,000	26,880,000
Unrestricted - dental contingent reserve	779,000	737,000
Unrestricted net position	27,957,000	27,617,000
Total net position	\$ 28,322,362	\$ 27,997,210

- I. Income taxes - The Coalition has been recognized as having tax exempt status under Code Section 115 by the Internal Revenue Service.
- J. Marketing - The Coalition expenses marketing and advertising costs when incurred.
- K. Estimates - The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities and deferred outflows/inflows of resources as well as disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.
- L. Unpaid claims liabilities - The Coalition establishes claims liabilities based on estimates of the ultimate cost of claims (including future claim adjustment expenses) that have been reported but not settled, and of claims that have been incurred but not reported. The length of time for which such costs must be estimated varies depending on the coverage involved. Estimated amounts of excess insurance recoverable on unpaid claims are deducted from the liability for unpaid claims. The process used in computing claims liabilities does not necessarily result in an exact amount. Claims liabilities are recomputed periodically using the development actuarial method which assumes that past patterns of lag between the date a service is received and the date the claim is paid for the service will continue in the future and other economic factors. Adjustments to claims liabilities are charged or credited to expense in the periods in which they are made.
- M. Excess insurance - The Coalition purchases an individual insurance policy in excess of predetermined levels of retained losses or self-insurance. The excess insurance program may change each coverage year to accommodate increased Membership and changing insurance market conditions. Excess insurance permits recovery of a portion of losses from excess insurers, although it does not discharge the primary liability of the Coalition as direct insurer of the risks. The Coalition does not report risks covered by excess insurance as liabilities unless it is probable that those risks will not be covered by the excess insurers and is refunded by excess insurers. Premiums paid to excess insurers for the years ended June 30, 2022 and 2021 were \$4,236,624 and \$3,120,755 respectively. There was \$1,995,704 and \$967,621 recovered from excess insurers and deducted from claims paid for fiscal years ended June 30, 2022 and 2021, respectively.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**1. Organization and significant accounting policies (continued):**

Third party health coverage was purchased from Optum for the 2022 program year subject to individual losses in excess of \$550,000 per covered enrollee for loss year 2022 with an aggregating deductible of \$125,000. The Coalition does not currently purchase aggregate excess insurance. The Medigap portion of the Coalition's SchoolCare 65+ program is fully insured through the United American Insurance Company, and the prescription drug program is fully insured through Express Scripts. The dental insurance benefit option was self-funded through Cigna beginning July 1, 2013. All ancillary coverages are also fully insured through Mutual of Omaha and VSP Vision.

- N. Deferred revenue - Financials are presented in accordance with GASB Statement No. 65, Items Previously Reported as Assets and Liabilities. In addition to assets and liabilities, deferred outflows of resources (previously reported as assets) and deferred inflows of resources (previously reported as liabilities), are reported as separate sections in the statement of net position. Deferred outflows of resources represent a consumption of net position that applies to a future period and will not be recognized as an outflow of resources in the current period. Deferred inflows of resources represent an acquisition of net position that applies to a future period and will not be recognized as an inflow of resources in the current period. The Coalition does not currently report any deferred outflows of resources. The Coalition reports deferred revenue which represents Members' contributions received in advance of the month of coverage as deferred inflows of resources.
- O. Premium deficiency reserve - In accordance with GASB Statement No. 30, "Risk Financing Omnibus," premium deficiencies are required to be calculated and reported by public entity risk pools. A premium deficiency can result when expected costs for coverage obligations as of the financial statement date exceed expected contributions (based on rates set prior to the financial statement date) for such coverage. There is no premium deficiency reserve recorded for June 30, 2022. A premium deficiency reserve of \$2,391,482 was recorded as of June 30, 2021. Investment income was included as part of the calculation in determining if a premium deficiency existed.
- P. Subsequent events - The Coalition has evaluated subsequent events through October 20, 2022, which is the date the financial statements were available to be issued.

**2. Investments:**

Investments are reported at fair value using quoted market prices. Net realized and unrealized gains and losses are included in the accompanying Statements of Revenues, Expenses and Changes in Net Position in earnings on investments under non-operating revenues and expenses. The Coalition's investments are subject to regulatory compliance requirements and various investment risks. The Coalition's investment policy, as approved by the Board of Directors, contains certain provisions and limitations intended to insure regulatory compliance and to mitigate the Coalition's exposure to investment risks.



**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**2. Investments (continued):**

Custodial credit risk - Custodial credit risk is the risk that, in the event of failure of the counterparty to a transaction, the Coalition will not be able to recover the value of its investments or collateral securities that are in the possession of another party. Investments other than the real estate investment trusts were held by US Bank at June 30, 2022 and June 30, 2021.

The Coalition's investments, including compliance consisted of the following as of June 30, 2022:

Category	Amount of Investment Portfolio	Percentage of Investment Portfolio	Non- Compliant Municipal Law RSA 35:9 Investments	Percentage of Municipal Law RSA 35:9 Non- compliant Investments	Non- Insurance Law 402:28:I Investments	Percentage of Insurance Law 402:28:I Non- compliant Investments
Corporate Bonds	\$ 11,081,960	21.89%	\$ 2,701,912	5.34%	\$ -	0.00%
Municipal Bonds	5,136,294	10.15%	-	0.00%	-	0.00%
Asset Backed Corporate	4,437,883	8.77%	-	0.00%	-	0.00%
Mortgage Backed Corporate	8,533,223	16.86%	-	0.00%	-	0.00%
Exchange Traded Funds	6,777,523	13.39%	-	0.00%	-	0.00%
REITs	55,393	0.11%	55,393	0.11%	55,393	0.11%
US Treasuries	2,233,794	4.41%	-	0.00%	-	0.00%
Total Investments	<u>38,256,070</u>	<u>75.58%</u>	-	0.00%	-	0.00%
Cash and Money Markets	12,363,690	24.42%	-	0.00%	-	0.00%
Total Investment Portfolio	<b>\$50,619,760</b>	<b>100%</b>	-	0.00%	-	0.00%
Total Out of Compliance			<b>\$ 2,757,305</b>	<b>5.45%</b>	<b>\$ 55,393</b>	<b>0.11%</b>

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**2. Investments (continued):**

The Coalition's investments, including compliance consisted of the following as of June 30, 2021:

Category	Amount of Investment Portfolio	Percentage of Investment Portfolio	Non-Compliant Municipal Law RSA 35:9 Investments	Percentage of Municipal Law RSA 35:9 Non-compliant Investments	Non-Insurance Law 402:28:I Investments	Percentage of Insurance Law 402:28:I Non-compliant Investments
Corporate Bonds	\$ 11,524,413	17.88%	\$ 371,534	0.58%	\$ -	0.00%
Government Bonds	687,093	1.07%	-	0.00%	-	0.00%
Municipal Bonds	5,431,836	8.43%	-	0.00%	-	0.00%
Asset Backed Corporate	3,123,971	4.85%	-	0.00%	-	0.00%
Mortgage Backed Corporate	11,380,113	17.66%	-	0.00%	-	0.00%
Exchange Traded Funds	8,470,282	13.14%	-	0.00%	-	0.00%
REITs	53,483	0.08%	53,483	0.08%	53,483	0.08%
US Treasuries	3,449,676	5.35%	-	0.00%	-	0.00%
Total Investments	44,120,867	68.47%	-	0.00%	-	0.00%
Cash and Money Markets	20,321,815	31.53%	-	0.00%	-	0.00%
Total Investment Portfolio	<b>\$64,442,682</b>	<b>100%</b>	-	0.00%	-	0.00%
Total Out of Compliance			<b>\$ 425,017</b>	<b>0.66%</b>	<b>\$ 53,483</b>	<b>0.08%</b>

Interest rate risk - Interest rate risk is the risk that changes in market interest rates will adversely affect the fair value of an investment. Generally the longer the maturity of an investment the greater the sensitivity of its fair value to changes in the market interest rates. The Coalition mitigates the risk that the market value of securities will fall due to changes in general interest rates by structuring the portfolio with allocations across asset class sectors to position the portfolio to take advantage of changes in the interest rate environment.

Maturities of interest earning investments at June 30, 2022 are as follows:

	Fair Value	Less than One Year	1 to 5 Years	6 to 10 Years	After 10 Years
US Treasuries	\$ 2,233,794	\$ -	\$ 1,945,747	\$ 288,047	\$ -
Corporate bonds	11,081,960	848,779	4,169,945	5,750,610	312,626
Municipal bonds	5,136,294	399,980	2,127,430	2,513,623	95,261
Asset backed	4,437,883	200,012	3,534,526	325,695	377,650
Mortgage backed	8,533,223	399,232	1,849,658	993,633	5,290,700
	<b>\$ 31,423,154</b>	<b>\$ 1,848,003</b>	<b>\$ 13,627,306</b>	<b>\$ 9,871,608</b>	<b>\$ 6,076,237</b>

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**2. Investments (continued):**

Maturities of interest earning investments at June 30, 2021 are as follows:

	Fair Value	Less than One Year	1 to 5 Years	6 to 10 Years	After 10 Years
US Treasuries	\$ 3,449,676	\$ -	\$ 2,861,238	\$ 588,438	\$ -
Government bonds	687,093	404,916	282,177	-	-
Corporate bonds	11,524,413	607,156	4,849,003	6,068,254	-
Municipal bonds	5,431,836	170,000	1,754,813	3,215,273	291,750
Asset backed	3,123,971	203,361	2,136,488	254,731	529,391
Mortgage backed	11,380,113	200,770	1,881,558	1,219,084	8,048,701
	<u>\$ 35,597,102</u>	<u>\$ 1,586,203</u>	<u>\$ 13,765,277</u>	<u>\$ 11,345,780</u>	<u>\$ 8,869,842</u>

Credit risk - Credit risk is the risk that an issuer of or counterparty to an investment will not fulfill its obligations. Concentration of credit risk is the risk of loss attributed to the magnitude of an investor's investment in a single issuer. Except for the concentration of investments in Mutual Funds, the Coalition investments are diversified.

The table below outlines third party credit ratings of the Coalition's fixed maturity securities at June 30, 2022:

	U.S. Treasuries	Corporate Bonds	Municipal Bonds	Asset Backed	Mortgage Backed	Totals
AAA	\$ -	\$ 401,358	\$ 2,317,394	\$ 3,660,827	\$ 1,235,230	\$ 7,614,809
AA+	2,233,794	105,215	1,072,845	-	4,122,519	7,534,373
AA	-	370,724	660,360	-	-	1,031,084
AA-	-	691,783	-	-	-	691,783
A+	-	3,270,391	452,779	-	-	3,723,170
A	-	2,031,113	-	-	-	2,031,113
A-	-	3,891,064	-	-	-	3,891,064
BBB+	-	-	-	-	-	-
BBB	-	320,312	-	-	-	320,312
BBB-	-	-	-	-	-	-
BB	-	-	-	-	-	-
NA	-	-	632,916	777,056	3,175,474	4,585,446
NR	-	-	-	-	-	-
	<u>\$ 2,233,794</u>	<u>\$ 11,081,960</u>	<u>\$ 5,136,294</u>	<u>\$ 4,437,883</u>	<u>\$ 8,533,223</u>	<u>\$ 31,423,154</u>

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**2. Investments (continued):**

The table below outlines the third party credit ratings of the Coalition's fixed maturity securities at June 30, 2021:

	U.S. Treasuries	Government Bonds	Corporate Bonds	Municipal Bonds	Asset Backed	Mortgage Backed	Totals
AAA	\$ -	\$ -	\$ -	\$ 2,006,366	\$ 2,945,502	\$ 4,430,336	\$ 9,382,204
AA+	3,449,676	687,093	122,907	1,611,889	-	6,949,777	12,821,342
AA	-	-	731,461	773,011	-	-	1,504,472
AA-	-	-	864,379	-	-	-	864,379
A+	-	-	2,988,687	260,133	178,469	-	3,427,289
A	-	-	1,843,765	252,749	-	-	2,096,514
A-	-	-	4,601,680	-	-	-	4,601,680
BBB+	-	-	371,534	-	-	-	371,534
BBB	-	-	-	-	-	-	-
BBB-	-	-	-	-	-	-	-
BB	-	-	-	-	-	-	-
NA	-	-	-	527,688	-	-	527,688
NR	-	-	-	-	-	-	-
			-				
	<u>\$ 3,449,676</u>	<u>\$ 687,093</u>	<u>\$ 11,524,413</u>	<u>\$ 5,431,836</u>	<u>\$ 3,123,971</u>	<u>\$ 11,380,113</u>	<u>\$ 35,597,102</u>

Marketable equity securities were recorded using Level 1 fair values based on observable quoted market prices from national securities exchanges. Corporate bonds and government bonds were recorded using Level 2 fair values are priced using standard inputs, when available, which include: benchmark yields, reported trades, broker/dealer quotes, issuer spreads, two-sided markets, bids, offers, and reference data. Inputs used also take into consideration market indicators, industry, and economic events. REITS classified as Level 3 are valued using discounted cash flow techniques.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**2. Investments (continued):**

The following table sets forth by level, within the fair value hierarchy, the Coalition's investments at fair value as of June 30, 2022 and 2021:

	Quoted Prices in Active Markets (Level 1)	Significant Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
<b>June 30, 2022</b>			
Corporate Bonds	\$ -	\$ 11,081,960	\$ -
Municipal Bonds	-	5,136,294	-
Asset Backed Corporate	-	4,437,883	-
Mortgage Backed Corporate	-	8,533,223	-
Exchange Traded Funds	6,777,523	-	-
REITs	-	-	55,393
US Treasuries	-	2,233,794	-
	<hr/>	<hr/>	<hr/>
Total Investments	<u>\$ 6,777,523</u>	<u>\$ 31,423,154</u>	<u>\$ 55,393</u>
	Quoted Prices in Active Markets (Level 1)	Significant Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
<b>June 30, 2021</b>			
Corporate Bonds	\$ -	\$ 11,524,413	\$ -
Government Bonds	-	687,093	-
Municipal Bonds	-	5,431,836	-
Asset Backed Corporate	-	3,123,971	-
Mortgage Backed Corporate	-	11,380,113	-
Exchange Traded Funds	8,470,282	-	-
REITs	-	-	53,483
US Treasuries	-	3,449,676	-
	<hr/>	<hr/>	<hr/>
US Treasuries	<u>\$ 8,470,282</u>	<u>\$ 35,597,102</u>	<u>\$ 53,483</u>

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**2. Investments (continued):**

Earnings on investments for the years ended June 30, 2022 and 2021, is summarized as follows:

	<u>June 30, 2022</u>	<u>June 30, 2021</u>
Interest income, net	\$ 1,013,196	\$ 1,106,411
Amortization expense	(133,599)	(147,464)
Realized gains	<u>498,265</u>	<u>676,201</u>
Earnings on investments	1,377,862	1,635,148
Unrealized (losses) gains	<u>(4,514,347)</u>	<u>1,125,361</u>
Earnings on investments (with unrealized gains)	<u>\$ (3,136,485)</u>	<u>\$ 2,760,509</u>

**3. Property and equipment:**

Property and equipment consisted of the following at year end:

	<u>Balance June 30, 2021</u>	<u>Increases</u>	<u>Decreases</u>	<u>Balance June 30, 2022</u>
Capital assets, being depreciated				
Buildings and improvements	\$ 608,762	\$ -	\$ -	\$ 608,762
Furniture and equipment	<u>122,572</u>	<u>7,823</u>	<u>-</u>	<u>130,395</u>
Total capital assets being depreciated	<u>731,334</u>	<u>7,823</u>	<u>-</u>	<u>739,157</u>
Less: accumulated depreciation for:				
Buildings and improvements	(237,378)	(20,383)	-	(257,761)
Furniture and equipment	<u>(113,746)</u>	<u>(2,287)</u>	<u>-</u>	<u>(116,033)</u>
Total accumulated depreciation	<u>(351,124)</u>	<u>(22,670)</u>	<u>-</u>	<u>(373,794)</u>
Total capital assets being depreciated, net	<u>\$ 380,210</u>	<u>\$ (14,847)</u>	<u>\$ -</u>	<u>\$ 365,362</u>

Depreciation expense was \$22,670 and \$22,149 for the years ended June 30, 2022 and 2021, respectively.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**4. Unpaid claims liabilities:**

As discussed in Note 1. A., the Coalition started pooling the risk for prescription drug coverage for retired Members under the Express Scripts Plan on July 1, 2002 through December 31, 2013 and started pooling the risk for the health benefit options on July 1, 2003. The Coalition also started pooling the risk for the dental benefit options as of July 1, 2013. The Coalition establishes a liability for both reported and unreported insured events, which includes estimates of both future payments of losses and related claim adjustment expenses, both allocated and unallocated.

The following represents changes in those aggregate liabilities for the Coalition for the years ended June 30, 2022, 2021 and 2020:

	<u>June 30, 2022</u>	<u>June 30, 2021</u>	<u>June 30, 2020</u>
Unpaid claims and allocated claims adjustment expenses at beginning of year	\$ 13,585,554	\$ 13,747,884	\$ 15,063,691
Incurred claims and allocated claim adjustment expenses:			
Provision for insured events of current fiscal year	185,954,152	178,399,479	158,820,984
Changes in the provision for insured events of prior fiscal years	(147,712)	(2,577,641)	(2,528,351)
Claims administration expenses, current year	5,235,783	5,132,741	5,080,260
Total incurred claims and claim adjustment expenses	<u>191,042,223</u>	<u>180,954,579</u>	<u>161,372,893</u>
Claim and allocated claim adjustment expense payments:			
Attributable to insured events of current fiscal year	170,945,452	164,813,925	145,073,100
Attributable to insured events of prior fiscal years	13,437,842	11,170,243	12,535,340
Claims administration expenses, current year	5,235,783	5,132,741	5,080,260
Total payments	<u>189,619,077</u>	<u>181,116,909</u>	<u>162,688,700</u>
Total unpaid claims and claim adjustment expenses at end of the year	<u>\$ 15,008,700</u>	<u>\$ 13,585,554</u>	<u>\$ 13,747,884</u>

As a result of changes in estimates of insured events in prior years, incurred losses and loss adjustment expenses decreased by \$147,712 and \$2,577,641 in 2022 and 2021, respectively, due to favorable loss development.

**5. Risk Pool Practices Agreement:**

On April 25, 2012, the Coalition entered into a Risk Pool Practices Agreement (the Agreement) with the New Hampshire Secretary of State. The Agreement was effective through April 25, 2017. The provisions of the Agreement significantly changed two areas of the Coalition's operations - return of surplus and investments.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**5. Risk pool practices agreement (continued):**

Return of surplus - From inception in 1995 to 2013, the Coalition returned surplus to its Members through rate stabilization to reduce rate increases. The New Hampshire Secretary of State, Bureau of Securities Regulation, during its 2012 on-site examination, noted the Coalition’s documentation of rate stabilization procedures and designation of surplus for this purpose. However, the Secretary of State, as a policy matter, did not agree that the use of rate stabilization as described is compliant with NH RSA 5-B and required the Coalition to return surplus to its Members through a “Premium Holiday”. The below chart has been updated to illustrate total Premium Holiday amounts paid to both former and current Members by year. Premium Holiday is paid to former Members by June 30th of each fiscal year and current Members as a Premium Holiday Credit on July 1st invoices. Current Member groups also have the option of receiving premium holiday credits via invoice credits or checks.

<u>Date of Premium Holiday</u>	<u>Total Amount of Premium Holiday</u>
December 1, 2012	\$ 4,250,000
December 1, 2013	\$ 4,250,000
July 1, 2014	\$ 21,697,052
July 1, 2015	\$ 4,308,814
July 1, 2016	\$ 1,221,078
July 1, 2017	\$ 4,636,390
July 1, 2018	\$ 6,128,691
July 1, 2019	\$ 11,081,915
July 1, 2020	\$ 11,967,897
July 1, 2021	\$ 13,138,415
July 1, 2022	\$ 10,831,066

This practice of return of surplus through a Premium Holiday was considered a change in accounting policy implemented in the year ended June 30, 2012.

Investments - The Board of Directors currently has an investment policy based on the “prudent person” standard whereby investments are made with judgment and care considering the probable safety of the investment as well as the expected income to be derived. This investment policy is reviewed annually by the Board.

The Coalition engages Strategic Asset Alliance (SAA) as an investment consultant and advisor to the Board and organization. Asset Allocation and Management Company (AAM) provides investment management and accounting services. US Bank acts as the custodian of Coalition funds.



**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEARS ENDED JUNE 30, 2022 AND 2021**

**5. Risk pool practices agreement (continued):**

The Coalition's investment portfolio on June 30, 2022 was valued at \$38,256,070. The June 30, 2021 value of the investment portfolio was \$44,120,867. The June 30, 2020 value of the investment portfolio was \$41,051,142. The Coalition's Risk Pool Practices Agreement with the NH Secretary of State expired as of April 25, 2017. Although the agreement is no longer in effect, operations and policies adopted as a result of its execution remain in place. The Coalition's investments are compliant with the requirements imposed upon municipalities pursuant to NH RSA 35:9, with the exception of an aggregate amount of 5.34% which is compliant with RSA 402:28. This aggregate amount includes the Coalition's cash, cash equivalents, and other non-REIT investments. The Coalition held securities that are non-compliant with NH RSA 35:9 in the amount of \$2,701,911 at June 30, 2022, \$371,534 at June 30, 2021, and \$53,249 at June 30, 2020. The increase in these securities is mostly attributable to investment in high yield bonds to further diversify the portfolio.

There remains one (1) Real Estate Investment Trust (REIT) in the Coalition's portfolio as of June 2022. The REIT balance was \$55,393 at June 30, 2022, \$53,483 at June 30, 2021 and \$68,764 at June 30, 2020. The Coalition temporarily retains the non-compliant investment and intends to liquidate as soon as practicable to do so without incurring penalties or breakage fees.

**6. Net position:**

Unrestricted net position - The medical contingent reserve is determined annually with advice of the Coalition's actuaries using a stochastic modeling methodology at the 95% confidence level and is held as under unrestricted net position as a designated contingent reserve for all business risks not included in loss reserves. The dental contingent reserve is also determined annually with advice of the Coalition's actuaries using two months projected claims payments. This is used instead of stochastic modeling due to both the size of the program as well as the predictability of claims payments. The Coalition does not retain an undesignated net position.

**7. Health care reform:**

On March 23, 2010, the Patient Protection and Affordable Care Act (PPACA) made significant changes impacting group health plans including the SchoolCare Medical Plans. Since 2010, the Coalition continues to monitor and assist Members with the implementation of changes required by PPACA. In 2022, the Coalition has accrued fees of approximately \$45,000 which represent the Coalition's annual assessment under the Act for the Comparative Effectiveness Research Fee. The Comparative Effectiveness Research fee was originally expected to sunset with a final payment date of July 31, 2020. The fees have been extended through June 30, 2029 for SchoolCare with a final payment date of July 31, 2030.

Annually the SchoolCare Medical Plans are amended to reflect benefit changes required by PPACA such as lifetime limits and preventive services. In addition, the Health Benefits Booklet has been updated with these benefit changes as well as other federal requirements including but not limited to eligibility criteria and the claims appeals procedures.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
RECONCILIATION OF CLAIMS LIABILITIES BY TYPE OF CONTRACT  
FOR THE YEARS ENDED JUNE 30, 2022, 2021 and 2020  
Schedule 1**

	<u>SchoolCare-Medical</u>			<u>SchoolCare - Dental</u>		
	<u>6/30/2022</u>	<u>6/30/2021</u>	<u>6/30/2020</u>	<u>6/30/2022</u>	<u>6/30/2021</u>	<u>6/30/2020</u>
Unpaid claims and allocated claims adjustment expenses at beginning of year	\$ 13,380,615	\$ 13,471,962	\$ 14,811,620	\$ 204,939	\$ 275,922	\$ 252,072
Incurred claims and allocated claim adjustment expenses:						
Provision for insured events of current fiscal year	181,591,852	174,048,873	155,031,129	4,362,301	4,350,606	3,789,855
Changes in the provision for insured events of prior fiscal year	(136,553)	(2,529,162)	(2,492,755)	(11,159)	(48,478)	(35,596)
Claims administration expenses, current year	<u>5,075,834</u>	<u>4,978,085</u>	<u>4,931,552</u>	<u>159,949</u>	<u>154,655</u>	<u>148,708</u>
Total incurred claims and claim adjustment expenses	<u>186,531,133</u>	<u>176,497,796</u>	<u>157,469,926</u>	<u>4,511,091</u>	<u>4,456,783</u>	<u>3,902,967</u>
Claim and allocated claim adjustment expense payments:						
Attributable to insured events of current fiscal year	166,813,199	160,668,259	141,559,168	4,132,254	4,145,667	3,513,933
Attributable to insured events of prior fiscal years	13,244,062	10,942,799	12,318,864	193,780	227,444	216,476
Claims administration expenses, current year	<u>5,075,834</u>	<u>4,978,085</u>	<u>4,931,552</u>	<u>159,949</u>	<u>154,655</u>	<u>148,708</u>
Total payments	<u>185,133,095</u>	<u>176,589,143</u>	<u>158,809,584</u>	<u>4,485,983</u>	<u>4,527,766</u>	<u>3,879,117</u>
Total unpaid claims and claim adjustment expenses at the years ended June 30, 2022, 2021 and 2020	<u>\$ 14,778,653</u>	<u>\$ 13,380,615</u>	<u>\$ 13,471,962</u>	<u>\$ 230,047</u>	<u>\$ 204,939</u>	<u>\$ 275,922</u>

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION  
COMPARATIVE SCHEDULE OF CLAIM DEVELOPMENT,  
EARNED ASSESSMENTS AND UNALLOCATED EXPENSES  
JUNE 30, 2022  
Schedule 2  
(Page 1 of 2)**

The following table illustrates how the Coalition's earned revenue (net of reinsurance) and investment income compare to related costs of loss (net of loss assumed by reinsurers) and other expenses assumed by the Coalition as of the end of each of the previous nine years. The rows of the table are defined as follows: (1) This line shows the total of the fiscal year's gross earned contribution revenue and investment revenue, contribution revenue ceded to reinsurers, and net earned contribution revenue and reported investment revenue. (2) This line shows the fiscal year's other operating costs of the Coalition including overhead and claims expense not allocable to individual claims. This operating cost has been updated to reflect administrative costs without inclusion of the SchoolCare 65+ fully-insured Medicare supplement plans or the fully insured ancillary products. (3) This line shows the Coalition's gross incurred claims and allocated claim adjustment expenses, claims assumed by reinsurers and net incurred claims and allocated adjustment expenses (both paid and accrued) as originally reported at the end of the first year in which the event that triggered coverage under the contract occurred (called policy year). (4) This section of ten rows shows the cumulative net amounts paid as of the end of successive years of each policy year. (5) This line shows the latest reestimated amount of claims assumed by reinsurers as of the end of the current year for each policy year. (6) This section of ten rows shows how each policy year's net incurred claims increased or decreased as of the end of successive years. (This annual reestimation results from new information received on known claims, reevaluation of existing information on known claims, and emergence of new claims not previously known). (7) This line compares the latest reestimated net incurred claims amount to the amount originally established (line 3) and shows whether this latest estimate of net claims cost is greater or less than originally thought. As data for individual policy years mature, the correlation between original estimates and reestimated amounts commonly is used to evaluate the accuracy of net incurred claims currently recognized in less mature policy years. The columns of the table show data for successive policy years.

**NEW HAMPSHIRE SCHOOL HEALTH CARE COALITION**  
**COMPARATIVE SCHEDULE OF CLAIM DEVELOPMENT, EARNED ASSESSMENTS AND UNALLOCATED EXPENSES**  
**JUNE 30, 2022**  
**Schedule 2 (Page 2 of 2)**

	Fiscal and Policy Year Ended										
	<u>6/30/2012</u>	<u>6/30/2013</u>	<u>6/30/2014</u>	<u>6/30/2015</u>	<u>6/30/2016</u>	<u>6/30/2017</u>	<u>6/30/2018</u>	<u>6/30/2019</u>	<u>6/30/2020</u>	<u>6/30/2021</u>	<u>6/30/2022</u>
(1) Required contribution and investment revenue:											
Earned	\$ 101,685,003	\$ 122,926,284	\$ 145,505,569	\$ 159,063,635	\$ 162,438,317	\$ 160,616,072	\$ 169,000,654	\$ 177,144,772	\$ 183,041,953	\$ 189,820,156	\$ 191,135,502
Ceded	1,126,463	1,430,523	1,974,516	2,206,484	1,460,836	1,608,270	1,631,254	1,830,356	2,596,101	3,120,755	4,236,624
Net earned	100,558,540	121,495,761	143,531,053	156,857,151	160,977,481	159,007,802	167,369,400	175,314,415	180,445,852	186,699,400	186,898,878
(2) Unallocated expenses	8,471,257	6,766,446	8,834,804	9,907,428	11,208,816	10,275,523	10,134,359	10,588,285	15,276,340	9,788,440	9,140,421
(3) Estimated claims and expenses, end of policy year											
Incurred	112,433,287	123,381,661	133,348,065	146,332,109	152,415,558	149,135,224	150,533,600	159,597,904	160,002,913	179,337,920	187,949,857
Ceded	0	255,417	1,045,871	418,193	175,325	623,032	1,808,003	2,27,784	1,181,929	938,441	1,995,704
Net incurred	112,433,287	123,126,244	132,302,194	145,913,916	152,240,233	148,512,192	148,725,597	159,370,120	158,820,984	178,399,479	185,954,153
(4) Net paid (cumulative) as of:											
End of the policy year	99,759,145	111,146,738	118,853,463	131,745,711	137,642,784	134,970,770	133,624,242	144,306,429	145,073,100	164,813,925	170,945,452
One year later	109,607,207	122,066,073	129,827,079	142,862,668	150,426,323	146,901,477	146,635,188	156,841,769	156,243,344	178,251,767	
Two years later	109,607,207	122,066,073	129,827,079	142,862,668	150,426,323	146,901,477	146,635,188	156,841,769	156,243,344		
Three years later	109,607,207	122,066,073	129,827,079	142,862,668	150,426,323	146,901,477	146,635,188	156,841,769			
Four years later	109,607,207	122,066,073	129,827,079	142,862,668	150,426,323	146,901,477	146,635,188				
Five years later	109,607,207	122,066,073	129,827,079	142,862,668	150,426,323	146,901,477					
Six years later	109,607,207	122,066,073	129,827,079	142,862,668	150,426,323						
Seven years later	109,607,207	122,066,073	129,827,079	142,862,668							
Eight years later	109,607,207	122,066,073	129,827,079								
Nine years later	109,607,207	122,066,073									
(5) Re-estimated ceded claims and expenses	-	255,417	1,195,297	649,305	257,907	790,968	3,333,399	863,082	2,258,451	967,621	1,995,704
(6) Re-estimated net incurred claims and expenses:											
End of the policy year	112,433,287	123,126,244	132,302,194	145,913,916	152,240,233	148,512,192	148,725,597	159,370,120	158,820,984	178,399,479	185,954,153
One year later	109,607,207	122,066,073	129,827,079	142,862,667	150,426,323	146,901,477	146,635,187	156,841,769	156,243,344	178,251,767	
Two years later	109,607,207	122,066,073	129,827,079	142,862,667	150,426,323	146,901,477	146,635,187	156,841,769	156,243,344		
Three years later	109,607,207	122,066,073	129,827,079	142,862,667	150,426,323	146,901,477	146,635,187	156,841,769			
Four years later	109,607,207	122,066,073	129,827,079	142,862,667	150,426,323	146,901,477	146,635,187				
Five years later	109,607,207	122,066,073	129,827,079	142,862,667	150,426,323	146,901,477					
Six years later	109,607,207	122,066,073	129,827,079	142,862,667	150,426,323						
Seven years later	109,607,207	122,066,073	129,827,079	142,862,667							
Eight years later	109,607,207	122,066,073	129,827,079								
Nine years later	109,607,207	122,066,073									
(7) Increase (decrease) in estimated net incurred claims and expenses from end of the policy year	(2,826,080)	(1,060,171)	(1,060,171)	(3,051,249)	(1,813,910)	(1,610,715)	(2,090,410)	(2,528,351)	(2,577,640)	(147,712)	-

INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND  
ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS  
PERFORMED IN ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS*

To the Board of Directors of  
New Hampshire School Health Care Coalition

### **Government Entity**

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of New Hampshire School Health Care Coalition (the Coalition) as of and for the year ended June 30, 2022, and the related notes to the financial statements, which collectively comprise the Coalition's basic financial statements, and have issued our report thereon dated October 20, 2022.

### **Internal Control Over Financial Reporting**

In planning and performing our audit of the financial statements, we considered the Coalition's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Coalition's internal control. Accordingly, we do not express an opinion on the effectiveness of the Coalition's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

### **Compliance and Other Matters**

As part of obtaining reasonable assurance about whether the Coalition's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

## **Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

  
Crowe LLP

West Hartford, Connecticut  
October 20, 2022