

UNION COUNTY – NON-BARGAINING UNIT EMPLOYEES SPECIAL REPORT ON PROJECTION OF HEALTH PLAN COSTS 2011

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I. Purpose of Study

This study was conducted at the request of Union County. The purpose of this study is to assess the long-term (25 year) cost impact of improving the current County health care subsidy for future retired members and their dependents and to compare this cost to the savings that may be achieved by an adjustment in the payroll of active members.

A description of the current health care subsidy is provided in Section 2. The data used for the study is summarized in Section 3 and Section 4. A description of the assumptions and methodology of the study is presented in Section 5.

The cost to the County to increase the subsidy to the full cost of all future health benefits was projected for the next 25 years. The cost of this improvement to the health care subsidy was compared to the cost savings to the County that would be achieved if the members were to forego general salary increases. The results of the study are shown in Section 6.

II. Description of Current Benefits

IN GENERAL

Effective 1/1/1987, there is a hospitalization insurance subsidy plan for eligible employees as defined in Article V. of the Union County Administrative Code.

ELIGIBILITY REQUIREMENTS

Employees must have been actively employed for the County of Union on or after 1/1/1987 and must retire on either a disability pension or after having reached the age of 55 years and having 25 years or more of service with the County, or retire and reach the age of 62 years or older with at least 15 years of service where the retirement has been shown to the satisfaction of the employer to have been necessitated by medical illness or disability of the employee. Employees who otherwise qualify for coverage but who retire before age 55 shall be entitled to receive coverage under this plan upon reaching age 55. This benefit will only be provided to those retirees meeting the eligibility requirements who do not have hospitalization insurance coverage from another source, and eligible retirees shall cooperate in good faith with the County to verify that no other source of insurance coverage is provided for them.

RETIREE BENEFITS

The County subsidy shall be applied to the Hospital Insurance Plan that is provided to members of the bargaining unit. The County reserves the right to change or modify plans at any time so long as the modified plan provides substantially similar coverage to that in effect for members of the bargaining unit. The County subsidizes the premiums for qualifying retirees, as follows:

Category	County's Subsidy
Single-Under 65	\$189.67 per month
Single-Over 65	\$138.39 per month
Husband/Wife-Under 65 Parent/Child-Retiree Family-Under 65	\$540.58 per month
Husband/Wife-Over 65	\$276.77 per month
Husband/Wife-Retiree Over 65 Husband/Wife-Spouse Over 65	\$276.77 per month
Family-Over 65	\$442.88 per month
Family-Retiree Over 65 Family-Spouse Over 65	\$477.85 per month
Parent/Child-Retiree Over 65	\$338.69 per month

The remaining costs of the health insurance plan shall be borne by the retiree.

III. Participant Data

Data on active members were reported as of 1/1/2011. The data contained information on the member's birth date, service, sex and annual salary. A summary of the member data by age and service is shown below.

Full Years of Service

									Over	
Age	<u>0-5</u>	<u>5-10</u>	<u> 10-15</u>	<u>15-20</u>	<u>20-25</u>	<u>25-30</u>	<u>30-35</u>	35-40	<u>40</u>	Total
Under 25	6									6
25-30	23	9								32
30-35	14	14	4							32
35-40	6	13	16	4	1					40
40-45	10	13	9	12	5	2				51
45-50	15	15	18	13	20	7				88
50-55	11	16	20	14	17	17	5			100
55-60	14	20	24	8	7	6	8	3	1	91
60-65	4	10	15	7	11	2	1	4	1	55
Over 65	11	12	15	2	5	1	-	•	•	46
Total	114	122	121	60	66	35	14	7	2	541

The average age is 50.2

The average years of service is 12.9

The average salary is \$59,666

IV. Health Benefit Costs

In order to project future health benefit cost, we first developed current average health benefit costs. The active member data was analyzed to determine the number of members by type of coverage (married, single). The County provided the 2010/11 premium rates for the various coverages. We determined the average benefit costs by calculating the weighted average of the premium rates (using as weights the coverage types). The premium rates after 65 (when Medicare eligibility is attained) were not provided, so we determined the rates after age 65 to be in the same ratio as the County subsidy before age 65 to the County subsidy after age 65. The average amount of subsidy paid by the County was also developed by using a weighted average of the subsidy rates. The data used to determine the averages and a summary of the average rates is shown below:

1. 2010/11 Monthly Rates For Direct Access Plan

	Horizon	Direct	
	<u>PPO</u>	Access Plan	Health Net
Single	614.91	558.34	511.41
Family	1688.34	1533.00	1455.10
Two Adults	1636.62	1486.05	1359.80
Parent/Child	1609.78	1461.67	1391.24

2. Percentage Electing Various Benefit Plans

<u>Plan</u>	Percentage
Direct Access	52.5%
Horizon PPO	0.3%
Health Net	32.8%
None	14.4%

3. Percentage by Coverage Type

<u>Coverage</u>	Percentage
Single	29.0%
Family	24.4%
Two Adults	19.7%
Parent/Child	12.5%
Waived Benefits	14.4%

^{*} We assumed that, at retirement, 61% will elect Two Adults coverage and 39% will elect Single coverage.

Applying the above percentages to the 2010/11 premium rates and the subsidy paid by the County, we determined the average monthly benefit costs and average monthly subsidy amount shown below:

		Weighted Average Amount			
		Before Age 65	Age 65 & Over		
1.	Subsidy Paid by County	404.43	223.08		
2.	Total Health Benefit Costs	987.23	544.55		
3.	Percent Paid by County	41.0%	41.0%*		

^{*} Assumed to equal Before Age 65 subsidy percent; percentage was used to determine amount in item 2.

V. Actuarial Methods and Assumptions

ACTUARIAL METHODS

Using the individual member data provided and the assumptions described below we first projected the health benefit cost for future retirees and covered spouses/dependents under various alternatives for the next 25 years, starting with 2011. The base case uses the current benefit provisions and assumes the County fully subsidizes total health benefit cost.

Next we projected the future payroll of the active members for 25 years. For this projection we assumed that the number of members would remain constant at 541 in the future. We assumed that total payroll growth will consist of a general salary increase of 3.0% per year.

Finally, we projected the payroll savings that would be achieved if the active members agree to forego a general 2011 payroll increase and compared this to the cost of improving the County subsidy for health benefit cost.

The results of the projections are shown in Section 6.

ACTUARIAL ASSUMPTIONS

1. SALARY INCREASE:

3% per year

2. SEPARATIONS FROM SERVICE:

Representative values of the assumed annual rates of Separation are as follows:

Annual Rates Of Withdrawal

<u>Age</u>	Rate
25	3.50%
30	2.25%
35	1.85%
40	1.74%
45	1.50%
50	0.03%
55	0.00%

Annual Rates of

Service Requirement Length of Service

<u>Age</u>	<u>Death</u>	<u>Disability</u>	25 Years	26 or More Years
25	.015%	.100%	0.00%	0.00%
30	.021%	.150%	0.00%	0.00%
35	.037%	.250%	0.00%	0.00%
40	.051%	.385%	0.00%	0.00%
45	.079%	.418%	0.00%	0.00%
50	.120%	.363%	0.00%	0.00%
55	.230%	.600%	52.00%	17.48%
60	.460%	.160%	52.00%	22.78%
64	.800%	.300%	52.00%	37.80%
65 and Over	.000%	.000%	100.00%	100.00%

- 3. RETIREMENT AGE: As soon as eligible for coverage.
- 4. DEATHS AFTER RETIREMENT: RP2000 Table for Males and Females:

Age	<u>Men</u>	Women
55	0.251%	0.231%
-60	0.518%	0.464%
65	1.038%	0.902%
70	1.769%	1.531%
75	3.092%	2.497%
80	5.592%	4.158%
85	10.038%	7.119%

- 5. COVERAGE TYPES: We assumed that 39% of participants elect single coverage and 61% elect husband/wife coverage.
- 6. COST INFLATION: We have assumed that medical plan gross costs will increase each year (compounding) as shown below (where the increase is from the year shown through the following year):

<u>Year</u>	Rate
2010-11	10.0%
2011-12	8.0%
2012-13	6.0%
2013-14	5.0%
2014-15	4.5%
Thereafter	4.0%

7. AGE-BASED COST INCREASES: We have assumed that health plan costs will be reduced at age 65 as Medicare eligibility is attained. We have assumed that the reduction at age 65 will be in the same proportion as the current reduction in the County subsidy after age 65.

VI. Study Results and Projections

This section contains the results of the projection of the health benefit subsidy/cost and compares the cost to the possible savings from active members "foregoing" a one-year future pay increase.

The projections have been completed based on various scenarios that illustrate the effect of:

- 1. Improvements to the current subsidy; we have projected the cost based on the current flat subsidy and a full subsidy of the cost of future benefits.
- 2. Changes to the one-year pay increase that the active member may forego. For this, we show projections that use a foregone 3% pay increase in the first year of the projection.
- 3. Higher annual increases in future health care cost. The assumptions used for the base case are detailed in Section 5. We also show results using these rates plus 1% for each future year.
- 4. The accumulated cost savings versus the cost expenditures. The projections show that the savings from the pay adjustment are greater in the earlier years than the cost of the increase in the health subsidy. The opposite is true in later years. Therefore, we show the accumulated value of both the cost and savings and the effect of reflecting the time value of money on the accumulated cost.

Four alternatives are presented on the following pages. Below is a summary of the variables in each alternative:

- A-1 Base Case uses the assumptions stated in Section 5; shows the cost of the current subsidy and a full subsidy. For the one-time payroll adjustment, this alternative uses 3%.
- A-2 Base Case with an additional 2.5% payroll adjustment in the second year.
- B-1 Base Case with 1% increase in medical trend.
- B-2 Case A-2 with 1% increase in medical trend and an additional 3.0% payroll adjustment in the second year

VII. Summary

Exhibit B-2 shows that a foregoing a 3% pay increase in year one and foregoing a 3.0% increase in year two will result in the accumulated savings equaling the accumulated cost of the full subsidy at 25 years.

Exhibit A-1

25 Year Projection of Cost of Health Benefit Subsidy for Future Retirees and Payroll Adjustment for Active Members

Medical Inflation of 10% Grading to 4% in 2015 and After

	Possible				
	Payroll	Accumulated		Added Cost	Accumulated
	Savings 3%	Savings: 3%	Current Cost:	for Full	Cost of Full
Year	for One Year	Interest	Flat Subsidy	Subsidy	Subsidy
2011	968,375.45	968,375.45	360,945.00	520,137,84	520,137.84
2012	997,426.71	1,994,853.43	486,589.54	701,197.06	1,236,939.04
2013	1,027,349.51	3,082,048.54	587,101.35	846,039.09	2,120,086.30
2014	1,058,170.00	4,232,680.00	692,800.16	998,355.86	3,182,044.75
2015	1,089,915.10	5,449,575.50	870,993.84	1,255,140.72	4,532,646.81
2016	1,122,612.55	6,735,675.32	1,001,552.09	1,443,281.19	6,111,907.41
2017	1,156,290.93	8,094,036.51	1,112,841.56	1,603,654.51	7,898,919.14
2018	1,190,979.66	9,527,837.26	1,240,795.22	1,788,042.35	9,923,929.06
2019	1,226,709.05	11,040,381.42	1,366,503.83	1,969,194.35	12,190,841.28
2020	1,263,510.32	12,635,103.18	1,507,897.49	2,172,949.13	14,729,515.65
2021	1,301,415.63	14,315,571.91	1,678,279.27	2,418,477.18	17,589,878.29
2022	1,340,458.10	16,085,497.16	1,741,773.40	2,509,976.08	20,627,550.72
2023	1,380,671.84	17,948,733.92	1,853,706.46	2,671,277.20	23,917,654.44
2024	1,422,091.99	19,909,287.93	1,988,589.44	2,865,650.68	27,500,834.76
2025	1,464,754.75	21,971,321.32	2,088,488.13	3,009,609.67	31,335,469.47
2026	1,508,697.40	24,139,158.36	2,164,083.31	3,118,546.93	35,394,080.48
2027	1,553,958.32	26,417,291.43	2,206,944.37	3,180,312.88	39,636,215.77
2028	1,600,577.07	28,810,387.24	2,271,710.59	3,273,644.92	44,098,947.17
2029	1,648,594.38	31,323,293.24	2,416,716.78	3,482,605.87	48,904,521.45
2030	1,698,052.21	33,961,044.25	2,466,950.37	3,554,995.74	53,926,652.83
2031		36,728,869.35	2,530,028.49	3,645,894.96	59,190,347.38
2032	1,801,463.59	39,632,199.03	2,559,836.60	3,688,850.78	64,654,908.58
2033		42,676,672.50	2,597,259.00	3,742,778.77	70,337,334.61
2034		45,868,145.40	2,613,830.18	3,766,658.98	76,214,113.63
2035		49,212,697.66	2,691,993.30	3,879,295.54	82,379,832.57
2036	2,027,563.14	52,716,641.74	2,762,550.65	3,980,972.09	88,832,199.64

Exhibit A-2

25 Year Projection of Cost of Health Benefit Subsidy for Future Retirees and Payroll Adjustment for Active Members

Medical Inflation of 10% Grading to 4% in 2015 and After

	Possible Payroll				
	Savings 3% in	Accumulated		Added Cost	Accumulated
	Year One and	Savings: 3%	Current Cost:	for Full	Cost of Full
<u>Year</u>	2.5% Year Two	Interest	Flat Subsidy	Subsidy	Subsidy
2011	968,375.45	968,375.45	360,945.00	520,137.84	520.137.84
2012	1,804,406.25	2,801,832.97	486,589.54	701,197.06	1,236,939.04
2013	1,858,538.44	4,744,426.40	587,101.35	846,039.09	2,120,086.30
2014	1,914,294.60	6,801,053.79	692,800.16	998,355.86	3,182,044.75
2015	1,971,723.43	8,976,808.83	870,993.84	1,255,140.72	4,532,646.81
2016	2,030,875.14	11,276,988.23	1,001,552.09	1,443,281.19	6,111,907.41
2017	2,091,801.39	13,707,099.27	1,112,841.56	1,603,654.51	7,898,919.14
2018	2,154,555.43	16,272,867.68	1,240,795.22	1,788,042.35	9,923,929.06
2019	2,219,192.09	18,980,245.80	1,366,503.83	1,969,194.35	12,190,841.28
2020	2,285,767.86	21,835,421.04	1,507,897.49	2,172,949.13	14,729,515.65
2021	2,354,340.89	24,844,824.56	1,678,279.27	2,418,477.18	17,589,878.29
2022	2,424,971.12	28,015,140.42	1,741,773.40	2,509,976.08	20,627,550.72
2023	2,497,720.25	31,353,314.88	1,853,706.46	2,671,277.20	23,917,654.44
2024	2,572,651.86	34,866,566.19	1,988,589.44	2,865,650.68	27,500,834.76
2025	2,649,831.42	38,562,394.59	2,088,488.13	3,009,609.67	31,335,469.47
2026	2,729,326.36	42,448,592.79	2,164,083.31	3,118,546.93	35,394,080.48
2027	2,811,206.15	46,533,256.73	2,206,944.37	3,180,312.88	39,636,215.77
2028	2,895,542.33	50,824,796.76	2,271,710.59	3,273,644.92	44,098,947.17
2029	2,982,408.60	55,331,949.27	2,416,716.78	3,482,605.87	48,904,521.45
2030	3,071,880.86	60,063,788.61	2,466,950.37	3,554,995.74	53,926,652.83
2031	3,164,037.29	65,029,739.56	2,530,028.49	3,645,894.96	59,190,347.38
2032	3,258,958.41	70,239,590.15	2,559,836,60	3,688,850.78	64,654,908.58
2033	3,356,727.16	75,703,505.02	2,597,259.00	3,742,778.77	70,337,334.61
2034	3,457,428.97	81,432,039.14	2,613,830.18	3,766,658.98	76,214,113.63
2035	3,561,151.84	87,436,152.16	2,691,993.30	3,879,295.54	82,379,832.57
2036	3,667,986.40	93,727,223.13	2,762,550.65	3,980,972.09	88,832,199.64

Exhibit B-1

25 Year Projection of Cost of Health Benefit Subsidy for Future Retirees and Payroll Adjustment for Active Members

Medical Inflation of 11% Grading to 5% in 2015 and After

	Possible				
	Payroll	Accumulated		Added Cost	Accumulated
	Savings 3%	Savings: 3%	Current Cost:	for Full	Cost of Full
Year	for One Year	Interest	Flat Subsidy	Subsidy	Subsidy
2011	968,375.45	968,375.45	360,945.00	520,137.84	520,137.84
2012	997,426.71	1,994,853.43	491,013.08	707,571.58	1,243,313.56
2013	1,027,349.51	3,082,048.54	597,924.18	861,635.26	2,142,248.23
2014	1,058,170.00	4,232,680.00	712,227.81	1,026,351.97	3,232,867.64
2015	1,089,915.10	5,449,575.50	903,946.23	1,302,626.58	4,632,480.25
2016	1,122,612.55	6,735,675.32	1,049,390.73	1,512,218.81	6,283,673.47
2017	1,156,290.93	8,094,036.51	1,177,207.39	1,696,408.55	8,168,592.22
2018	1,190,979.66	9,527,837.26	1,325,182.57	1,909,648.36	10,323,298.35
2019	1,226,709.05	11,040,381.42	1,473,473.79	2,123,342.95	12,756,340.25
2020	1,263,510.32	12,635,103.18	1,641,569.75	2,365,576.96	15,504,607.42
2021	1,301,415.63	14,315,571.91	1,844,623.39	2,658,186.67	18,627,932.31
2022	1,340,458.10	16,085,497.16	1,932,818.61	2,785,281.06	21,972,051.34
2023	1,380,671.84	17,948,733.92	2,076,808.08	2,992,777.01	25,623,989.89
2024	1,422,091.99	19,909,287.93	2,249,347.17	3,241,414.81	29,634,124.39
2025	1,464,754.75	21,971,321.32	2,385,060.14	3,436,983.88	33,960,132.00
2026	1,508,697.40	24,139,158.36	2,495,153.44	3,595,634.72	38,574,570.68
2027	1,553,958.32	26,417,291.43	2,569,038.59	3,702,108.05	43,433,915.84
2028	1,600,577.07	28,810,387.24	2,669,858.25	3,847,394.97	48,584,328.29
2029	1,648,594.38	31,323,293.24	2,867,589.08	4,132,334.68	54,174,192.82
2030	1,698,052.21	33,961,044.25	2,955,340.56	4,258,789.80	60,058,208.40
2031		36,728,869.35	3,060,049.79	4,409,681.61	66,269,636.26
2032	1,801,463.59	39,632,199.03	3,125,872.67	4,504,536.69	72,762,262.03
2033	1,855,507.50	42,676,672.50	3,202,065.85	4,614,335.38	79,559,465.27
2034	1,911,172.72	45,868,145.40	3,253,481.40	4,688,428.13	86,634,677.36
2035	1,968,507.91	49,212,697.66	3,382,991.40	4,875,057.99	94,108,775.67
2036	2,027,563.14	52,716,641.74	3,505,041.21	5,050,937.70	101,982,976.64

Exhibit B-2

25 Year Projection of Cost of Health Benefit Subsidy for Future Retirees and Payroll Adjustment for Active Members

Medical Inflation of 11% Grading to 5% in 2015 and After

	Possible				
	Payroll Savings				
	3% in Year One	Accumulated			Accumulated
	and 2% Year	Savings: 3%	Current Cost:	Added Cost	Cost of Full
Year	Two	Interest	Flat Subsidy	for Full Subsidy	Subsidy
2011	968,375.45	968,375.45	360,945.00	520,137.84	520,137.84
2012	1,965,802.16	2,963,228.88	491,013.08	707,571.58	1,243,313.56
2013	2,024,776.23	5,076,901.97	597,924.18	861,635.26	2,142,248.23
2014	2,085,519.51	7,314,728.54	712,227.81	1,026,351.97	3,232,867.64
2015	2,148,085.10	9,682,255.50	903,946.23	1,302,626.58	4,632,480.25
2016	2,212,527.65	12,185,250.82	1,049,390.73	1,512,218.81	6,283,673.47
2017	2,278,903.48	14,829,711.82	1,177,207.39	1,696,408.55	8,168,592.22
2018	2,347,270.59	17,621,873.76	1,325,182.57	1,909,648.36	10,323,298.35
2019	2,417,688.70	20,568,218.68	1,473,473.79	2,123,342.95	12,756,340.25
2020	2,490,219.37	23,675,484.61	1,641,569.75	2,365,576.96	15,504,607.42
2021	2,564,925.95	26,950,675.09	1,844,623.39	2,658,186.67	18,627,932.31
2022	2,641,873.72	30,401,069.07	1,932,818.61	2,785,281.06	21,972,051.34
2023	2,721,129.94	34,034,231.08	2,076,808.08	2,992,777.01	25,623,989.89
2024	2,802,763.83	37,858,021.84	2,249,347.17	3,241,414.81	29,634,124.39
2025	2,886,846.75	41,880,609.25	2,385,060.14	3,436,983.88	33,960,132.00
2026	2,973,452.15	46,110,479.68	2,495,153.44	3,595,634.72	38,574,570.68
2027	3,062,655.72	50,556,449.79	2,569,038.59	3,702,108.05	43,433,915.84
2028	3,154,535.39	55,227,678.67	2,669,858.25	3,847,394.97	48,584,328.29
2029	3,249,171.45	60,133,680.48	2,867,589.08	4,132,334.68	54,174,192.82
2030	3,346,646.59	65,284,337.48	2,955,340.56	4,258,789.80	60,058,208.40
2031	3,447,045.99	70,689,913.60	3,060,049.79	4,409,681.61	66,269,636.26
2032	3,550,457.37	76,361,068.38	3,125,872.67	4,504,536.69	72,762,262.03
2033	3,656,971.09	82,308,871.52	3,202,065.85	4,614,335.38	79,559,465.27
2034	3,766,680.22	88,544,817.89	3,253,481.40	4,688,428.13	86,634,677.36
2035	3,879,680.63	95,080,843.06	3,382,991.40	4,875,057.99	94,108,775.67
2036	3,996,071.05	101,929,339.40	3,505,041.21	5,050,937.70 [101,982,976.64

COUNTY OF UNION

Part C - GOVERNMENT RECORDS REQUEST RESPONSE Requestor puges, at a total cost of: Document(s) provided: Special Service Charge imposed - Reason: Document(s) have been inspected by the requestor on the date shown below: documents Document(s) not provided (see below) The document(s) you have requested that are checked below are NOT being provided because the document(s) are considered privileged or are otherwise exempt from public access, as provided by applicable law: Authority for Denial or Reduction Privileged or Protected Category N.J.S.A. 47:1A-1.1, et seq. Advisory, Consultative or Deliberative material N J.S.A. 47;1A-1.1, et seq. Autopsy Photos / Video **'** N.J.S.A. 47:1A-1.1, et seq. **Attorney-Client Privilege Information** N.J.S.A. 47:1A-1.1, et seq. Computer Security Information N.J.S.A. 47:1A-1.1, et seq. Criminal Investigatory Records N.J.S.A. 47:1A-1.1, et seq. Credit Card Numbers Executive Order 21 (McGreevey) Domestic Security (Sabotage or Terrorism) N.J.S.A. 47:1A-1.1, et seq. Grievance Information with public employer \Box N.J.S.A. 47:1A-1.1, et seq. Drivers' License Numbers N.J.S.A. 2A:156A-19 Electronic Surveillance Materials N.J.S.A. 47:1A-1.1, et seq. **Emergency or Security Information or Procedures** N.J.S.A. 47:1A-1.1, et seq. **Employee Sexual Harassment Complaints** Executive Order 9 (Hughes) Fingerprint Cards Executive Order 26 (McGreevey) Individual's Medical, Financial, or Tax records N.J.S.A. 47:1A-1.1, et seq. Insurance Communications N.J.S.A. 47:1A-3.a Investigation in Progress N.J.S.A. 47:1A-1.1, et seq. Labor Negotiation Information (strategy or positions) N.J.S.A. 47:1A-10 Personnel or Pension Records Executive Order 9 (Hughes) → Photographs of Crime Scene N.J.S.A. 47:1A-1.1, et seq. → Proprietary Information N.J.S.A. 47:1A-1.1, et seq. Reasonable Expectation of Privacy Executive Order 26 (McGreevey) Resumes of unsuccessful applicants Executive Order 69 (Whitman) Safety of persons or the public _____ N.J.S.A. 47:1A-1.1, et seq. Security Measures and Surveillance Techniques N.J.S.A. 47:1A-1.1, et seq. Social Security Numbers Executive Order 26 (McGreevey) Fest Questions, Scoring Keys, or other Exam Data N.J.S.A. 47:1A-1.1; N.J.S.A. 2A:82-46b Victim records Records Retention and Disposition Schedule Record has been destroyed/not retained pursuant to: _ _1 You have a right to appeal this decision that the documents requested are not accessible. You may take your appeal to the Government Records Council (GRC) or to the New Jersey Superior Court as provided by N.J.S.A. 47:1A-6 and 7. Please see the attached "Part D - Procedures to Challenge Denial of Access to Government Records" and GRC information. Date: County Official .ICKNOWLEDGMENT I hereby acknowledge that I have received copies of, or have been permitted to view/inspect, the documents requested except for any documents specifically listed above on which a determination has been made that the documents could not be provided in accordance with applicable law. If any documents have not been provided, I have received information as to the procedures for an appeal of the determination. Date: Version 6/09 (prior editions obsolete) Requestor's Signature