

Idaho Immunization Assessment Board
Board Meeting Minutes
Monday, July 14, 2014
Idaho Department of Insurance Office

Board Members Present:

- Jack Myers – Blue Cross of Idaho – Chair
- Richard Rainey, M.D. – Regence BlueShield of Idaho
- Tim Callender – AmeriBen/IEC Group
- Christine Hahn, M.D. – Department of Health & Welfare
- Chris Pickford – Boise School District
- Mike Hodge, Director of Employee Benefits - Albertsons LLC & New Albertsons Inc.
- Jeff Thompson, Representative - Idaho House of Representatives

Board Members Absent:

- Todd Lakey, Senator - Idaho Senate
- Ted Epperly, M.D. - Family Practice Residency – Vice Chair
- Bill Deal, Director - Department of Insurance

Others Present:

- Tom Donovan – Deputy Director, Department of Insurance
- Gina McBride – Bureau Chief of Consumer Services – DOI
- Rich Burleigh – Deputy Attorney General- DOI
- Tamarie Olson – Immunization Program – DHW
- Kurt Stembridge – GlaxoSmithKline

Call to Order: Chairman Myers called the meeting to order at 3:10 PM MDT.

Approval of Minutes from 4/7/14 meeting: Dr. Richard Rainey moved to accept the minutes and Representative Jeff Thompson seconded the motion. Minutes unanimously approved.

Also approved were the wording changes, revisions to the handouts from the April IIAB meeting: Financial report as of 4-1-14 (Idaho Immunization Dedicated Vaccine Fund for SFY2014) including the related Adjustment Report; Vaccine Assessment as Voted, dated April 7, 2014; Historical chart of Vaccine Assessment-Annual Cost per Child 2011-2015. These updated documents are attached to the minutes.

Reports:

1. Financial Report (combined DHW & DOI report): Elaine Diner presented the report for the period **July 1, 2013 through June 30, 2014**. The Financial Report was updated to include one last payment; no changes to adjustment report from last meeting. (Copy attached to minutes)
Original Budget was \$18,970, 634; the Total Adjusted Budget after pre-billing adjustments (and unanticipated collections) was \$19,001,481.36. Assessments collected from carriers was \$16,807,190.36 which was the same as the amount transferred to the Department of Health & Welfare. Vaccine expenditures totaled \$17,785,573. Funds remaining in the Dedicated Vaccine Fund (including carry-forward balance) total \$1,592,601.36.

Jack Myers asked a question regarding the remaining funds: Are any more expenditures anticipated? Tamarie Olsen said that there are no more expenditures coming in for the past fiscal year (2013 – 2014) and that the \$1,592,601.36 is the amount of carry-forward for the next fiscal year.

Dr. Rainey asked if we are close to budget at the \$1.5 million remaining in the Vaccine Fund. Tamaire Olsen responded that we have about \$500,000 above what we anticipated. The DHW stopped purchasing vaccines in mid-July so that all expenditures were completed by the end of the fiscal year. In addition, there is some cushion in the account to demonstrate to the CDC that we have the funds to purchase vaccines in the coming year. Jack Myers added that the extra amount will also be a cushion for adjustments in the next year.

2. Financial Report for the **new fiscal year (2014 – 2015)** with data as of **7/1/14** (copy attached to minutes): Total Original budget was \$20,013,426.36; the total Adjusted Budget after adjustments and unanticipated collections is \$20,016,428.36. Assessments required of carriers after carry-over funds and adjustments is \$17,960,307.00. Assessments collected from carriers is \$8,880,528.75 and the remaining assessments to be collected total \$9,079,778.25 which is made up of 12 companies that need to pay their assessments and 3 companies pay on a quarterly basis, so some of those funds are not yet due. Transfer of collected funds will be sent to the DHW at the end of the month. All adjustments have been emailed and approved by the IIA board. As of 7/1/14 there have been no vaccine expenditures for the 2014 – 2015 fiscal year.

Dr. Christine Pickford asked what can we do to eliminate errors on surveys, since some of the surveys have had to be adjusted downward due to errors by new people, self-audit discoveries, and typos. Elaine said that there are several things that Jack Myers and Dr. Rainey have suggested: checking the surveys to see if the numbers make sense and comparing survey numbers with past year's surveys. Jack Myers asked if we need to have the CFO sign the survey form. Dr. Hahn suggested that maybe that needs to go to only a few companies; if most companies are doing it correctly, don't slow the process.

Dr. Rainey asked that Elaine make a plan for next year to check the assessment surveys and do an analysis to include range of percentages of B number to the A number on the survey. Elaine is to present the plan at next meeting.

Old Business:

1. Gap in population of children – a question

From the last meeting there was a question about whether or not the CDC recognizes differences between states – some states have expanded Medicaid and some have not and how this would affect Immunization Assessment Fund. Dr. Rainey said that the administrative fee for the vaccine would not be covered. Tamaire Olsen said that the administrative fee can be waived by the clinic if the parents cannot pay it.

Dr. Hahn asked if we can wait for Dr. Epperly to clarify the question, since this was probably his question. Elaine will check with Dr. Epperly to see what the question is more specifically, then check with Mitch & Tamarie and bring an answer back to board

2. TRICARE

Dr. Hahn explained that in the past TRICARE has maintained that they cannot contribute to the Immunization Fund because TRICARE is required to pay the physician/providers directly and only after the service has been provided. Therefore DHW has asked the legislature each year for funds from the general fund to pay for immunizations for the TRICARE children. Governor Otter has twice written to the Federal Department of Defense and has not received a reply. The Governor's request was to utilize a portion of the federal code to allow pilot programs for innovative payment mechanisms.

The state of Washington has an assessment system that works differently from ours however they have also been attempting to get funding from TRICARE. They have received a response from the Dept. of Defense. TRICARE has

researched the issue of state vaccine programs and they can be considered TRICARE providers if certain conditions are met. (Copy of letter handed out). The letter is for the Washington program, however it might open a door for Idaho as well. Dr. Hahn said that this might require a revision of our statute. This is a potential alternative to asking the legislature each year for additional funding.

Dr. Rainey asked Dr. Hahn for a proposal to show how funding for TRICARE children would work in Idaho. Dr. Hahn will talk with the Washington State Immunization program and discuss the administration of TRICARE funding and what legislation might be required.

Dr. Hahn made a motion that the board supports DHW exploring in an aggressive manner how to make this change work for Idaho, including anticipated costs, logistical challenges, and proposed solutions and vetting the proposal with the Director. Dr. Rainey seconded the motion. Board unanimously approved.

Elaine will send a scan of the letter to all board members.

New Business:

1. Blue Cross Blue Shield of Louisiana – Executive Session

Tim Callender made the motion for an executive session under Open Meeting Law 67-2345.

Motion seconded by Rep. Jeff Thompson. Board members present unanimously voted to hold the executive session. Adjourned to executive session at 4:01 PM. Director Bill Deal anticipated his absence from the board meeting and assigned Deputy Director Tom Donovan to represent him at the board meeting and executive session. Returned to original agenda at 4:40 PM.

2. Review of Carrier surveys and payments received – covered above. Elaine read the list of companies that were late paying. Total amount due is \$904,076.00.

- PacificSource (carrier) \$624,337 – no first bill
- Pacific Source (TPA) \$40,527 – no first bill
- Group Health Options \$121,423 – no first bill
- Blue Cross Blue Shield of North Carolina \$ 17,854 – no first bill
- Blue Cross Blue Shield of Tennessee \$71,258 – added late; after assessment vote
- The Mega Life and Health Insurance Co. \$17,617
- EBSO Inc. \$6,004
- New York Life Insurance Co. \$2,258
- Midwest National Life Insurance Co. of Tennessee \$1,027
- Great West Life Assurance \$869
- FCE Benefit Administrators \$553
- Summit America DBA Ascension Benefits \$79

3. Education for Employers - Elaine said that when the final version is approved it will be posted on the website and also sent with the 2014 survey in January 2015. Jack Myers added that we need to add to the Educational Material that the cost savings for vaccines be included (cost savings with and without the immunization program). Final version will be addressed at the next board meeting.

4. Future of IIA Program – Idaho Statute that authorizes the immunization program will sunset on June 30, 2015. Board will need to take some action prior to the next legislative session. We need to take the cost saving information to the legislature. The cost-saving information should be available by the next board meeting later in this year. Dr. Hahn suggested that Blue Cross prepare a template that other companies can fill out with their statistics (September to September plus 60 days for claims to be paid). Jeff Thompson said that the legislation needed would be to eliminate the sunset provision or extend the sunset date.

5. **Getting data from carriers** costs of vaccines with and without assessment (included above)
6. **Counting dependents under 19** as of January 1st. Jan 1 is the cut-off dates. Companies do not necessarily know their enrollment on 1/1. The Jan. 31st date is the reporting date for enrollment on 1/1.

Next meeting – TBD

Elaine Diner will send an email to all board members to determine the availability of dates in late October or early November.

Agenda Topics for next meeting:

- TRICARE update (Dr. Hahn)
- Checklist for survey data received and range of percentages B number to A number (Elaine)
- Question on Gap of Medicaid children count effecting Immunization Assessment Fund (Elaine)
- Info from companies/carriers on cost savings of the IIA program
- Educational Materials to include cost savings of the IIA program

Adjournment: Representative Jeff Thompson made a motion to adjourn the meeting; Dr. Christine Pickford seconded the motion. Meeting was adjourned at 5:02 PM MDT.

Minutes by Elaine Diner, Administrator for the Idaho Immunization Assessment Board.

Attachments presented at meeting:

1. Financial report Immunization Vaccine Fund SFY 2013-2014
2. Financial report Immunization Vaccine Fund SFY 2014-2015
3. Letter from Dept. of Defense to Washington State RE: TRICARE
4. Updated reports from prior meeting:
 - Financial report as of 4-1-14 (Idaho Immunization Dedicated Vaccine Fund for SFY2014) including the related Adjustment Report;
 - Vaccine Assessment as Voted, dated April 7, 2014;
 - Historical chart of Vaccine Assessment-Annual Cost per Child 2011-2015

	B	C	D	E	F
1	6/30/2014				
2					
3					
4					
5	Idaho Immunization Dedicated Vaccine Fund				
6	Funds Collected for SFY2014 (July 1, 2013 - June 30, 2014)				
7	Financial Report as of 6-30-14				
8	Anticipated Carry Forward Balance	\$ 2,035,208.00			
9	Assessment as Voted	\$ 16,935,426.00			
10	Adjustments Between Vote and Billing	\$ (17,070.00)			
11	Assessment as BILLED	\$ 16,918,356.00	CHANGED to reflect 216,902 dependents X \$78		
12	Total Original Budget	\$ 18,970,634.00	=C8 + C9		
13	Total Budget after Pre-billing Adjustments	\$ 18,953,564.00	=C8 + C11		
14	Unanticipated Collections**	\$ 47,917.36			
15	TOTAL ADJUSTED BUDGET	\$ 19,001,481.36	=C13+C14		
16	Notes				
17	DOI Adjustments to Original Budget				
18	Refunds to Carriers*	\$ (71,102.00)		-0.37%	Percentage of original budget
19	Carrier Population Adjustments†	\$ (87,981.00)		-0.46%	Percentage of original budget
20					
21	Total Adjustments	\$ (159,083.00)	= C18+C19		Refunds + Adjustments
22					
23	Actual DHW Carry Forward	\$ 2,570,984.00			
24					
25	Operating Budget	\$ 19,330,257.00	=C11+C21+C23	101.90%	Assessment billed + adjustments + Actual carry forward
26					
27	Assessments Collected YTD from Carriers	\$ 16,807,190.36		86.95%	Percentage of operating budget after adjustments
28	Assessments Remaining to be Collected	\$ (47,917.36)	=C25-C27-C23	-0.25%	Operating budget - assessments collected - carry forward
29	Funds Transferred to IDHW	\$ 16,807,190.36		100.00%	Percentage of assessment collected
30					
31	Funds Received by the IDHW	\$ 16,807,190.36			
32					
33	Vaccine Expenditures				
34	Quarter 1	\$ 8,929,474.00		46.19%	Percentage of budget after adjustments
35	Quarter 2	\$ 3,952,658.00		20.45%	Percentage of budget after adjustments
36	Quarter 3	\$ 3,291,920.00		17.03%	Percentage of budget after adjustments
37	Quarter 4	\$ 1,611,521.00		8.34%	Percentage of budget after adjustments
38	Total Vaccine Expenditures	\$ 17,785,573.00	=SUM(C34:C37)	92.01%	Percentage of budget after adjustments
39					
40	Funds remaining in the Dedicated Vaccine Fund	\$ 1,592,601.36	=C31+C23-C38	8.24%	Percentage of budget after adjustments
41					
42	** See "Unanticipated Collections Detail" report				
43	*See "Carrier Refund Detail" report				
44	†See "Carrier Adjustment Detail" report				
45					
46					
47	(Data as of 6/30/14)				
48					
49					

6/30/2014		CARRIER REFUND DETAIL REPORT												
Company Name	# of Box B Dependents	Assessment \$	# of Dependents After Revisions	Original Assessment \$ Billed	Assessment \$ After Revisions		Assessment \$ Rec'd After Revisions/Refunds	Pymt plan over \$50,000	1st Qtr. Payment	2nd Qtr.	3rd Qtr. Payment	4th Qtr. Payment	Notes	
						Refunded Amt								
Key Benefit Administrators	160	\$78.00	160			\$ 200.00							overpayment was refunded	refund
LIFEWISE ASSURANCE COMPANY	645	\$78.00	0	\$ 50,310.00	\$ -	\$ 50,310.00							645 lives reported where included in Premera BC payment. Verified and refund processed for \$50,310.00	refund
LIFEWISE HEALTH PLAN OF OREGON INC.	216	\$78.00	0	\$ 16,848.00	\$ -	\$ 16,848.00							send email with revision and explanation	refund
Trusted Plans	334	\$78.00	343	\$ 26,052.00	\$ 26,754.00	\$ 156.00	\$ 26,754.00						Revision request for refund 8/20/13 - reported 2 more than should have been. Refund for \$156.00	refund
Group & Pension Administrators, Inc.	60	\$78.00	14	\$ 4,680.00	\$ 1,092.00	\$ 3,588.00	\$ 1,092.00						over paid, wants refund. Board reviewing. 5/16/13, refunding \$3,588.00 as requested, ok by board and fiscal. (46 fewer)	refund
					REFUND TOTAL:	\$ 71,102.00								

		CARRIER ADJUSTMENT DETAIL REPORT												
Company Name	# of Box B Dependents	Assessment \$	# of Dependents After Revisions	Original Assessment \$ Billed	Assessment \$ After Revisions		Assessment \$ Rec'd After Revisions/Refunds	Pymt plan over \$50,000	1st Qtr. Payment	2nd Qtr.	3rd Qtr. Payment	4th Qtr. Payment	Notes	
						Amt of Adjustment								
Key Benefit Adminstrators	160	\$ 78.00	160	\$ 12,480.00	\$ 12,480.00	\$ (200.00)	\$ 12,680.00						overpayment	
LIFEWISE HEALTH PLAN OF OREGON INC.	331	\$ 78.00	216	\$ 25,818.00	\$ 16,848.00	\$ 8,970.00	\$ 16,848.00						Adjustment was made before refund was requested	
TALL TREE ADMINISTRATORS, LLC	619	\$ 78.00	582	\$ 48,282.00	\$ 45,396.00	\$ 2,886.00	\$ 45,396.00						included 37 termed members in initial report. Paid for 582 instead of 619	
SELECTHEALTH, INC	726	\$ 78.00	693	\$ 56,628.00	\$ 54,054.00	\$ 2,574.00	\$ 54,054.00						changed # dependents (33 fewer)	
EMPLOYEE BENEFIT MANAGEMENT SERVICES INC	811	\$ 78.00	803	\$ 63,258.00	\$ 62,634.00	\$ 624.00	\$ 62,634.00						adjusted by 8 members due to group being counted that had terminated.	reduction
CONSOLIDATED HEALTH PLANS, INC	9	\$ 78.00	4	\$ 702.00	\$ 312.00	\$ 390.00	\$ 312.00						removed 5 due to student non renewable policy excluded from statute.	reduction
CNIC HEALTH SOLUTIONS INC	66	\$ 78.00	32	\$ 5,148.00	\$ 2,496.00	\$ 2,652.00	\$ 2,496.00						included termed member in original calculation by mistake (34 fewer)	reduction
Blue Cross and Blue Shield of Minnesota	4040	\$ 78.00	4041	\$ 315,120.00	\$ 315,198.00	\$ (78.00)	\$ 315,198.00						adjusted - increased by 1.	additional
Deseret Mutual	714	\$ 78.00	0	\$ 55,692.00	\$ -	\$ 55,692.00							removed 714 due to student non renewable policy (BYU Idaho) excluded from statute	reduction
CIGNA - TPA	1814	\$ 78.00	1,814	\$ 141,492.00	\$ 141,492.00	\$ -	\$ 141,492.00						Kristen Thomas @ CIGNA called to let me know that they had not reported their TPA membership for 2013. Sent assessment on 7/29/13. (Late Pay)	additional funds - this was not in the original survey
Washington Department of Health - Immunization Program	295	\$ 78.00	295	\$ 23,010.00	\$ 10,489.00	\$ 12,521.00	\$ 10,489.00						was billed \$23,010.00. Overpaid for 2012 \$12,521.00 so was credited that amount for 2013	reduction

SELF INSURED SERVICES COMPANY	27	\$ 78.00	22	\$ 2,106.00	\$ 1,716.00	\$ 390.00	\$ 1,716.00							dependents reduced by 5	reduction	
Meritain Health, Inc.	1476	\$ 78.00	1,456	\$115,128	\$113,568	\$ 1,560.00	\$113,568.00							dependents reduced by 20	reduction	
				\$ 735,150.00	\$ 776,683.00	\$ 87,981.00	\$ 776,883.00									
						Total Adjustment - less than original survey										

Company Name	# of Box B Dependents	UNANTICIPATED COLLECTIONS				Assessment \$ After Revisions	Assessment \$ Rec'd After Revisions/Refunds
		Assessment \$	# of Dependents After Revisions	Original Assessment \$ Billed			
United Healthcare (2010)	0	\$ 47.00	460			\$ 21,620.00	\$ 21,620.00
United Healthcare (2011)	0	\$ 58.18	452			\$ 26,297.36	\$ 26,297.36
					Total:	\$ 47,917.36	\$ 47,917.36

7/1/2014

Idaho Immunization Dedicated Vaccine Fund
Funds Collected for SFY2014 (July 1, 2014 - June 30, 2015)
Financial Report as of 7/1/14

Anticipated Carry Forward Balance	\$	1,592,601.36	
Assessment as Voted	\$	18,420,825.00	233,175 dependents X \$79.
Adjustments Between Vote and Billing	\$	-	
Assessment as BILLED	\$	18,420,825.00	
Total Original Budget	\$	20,013,426.36	=C8 + C9
Total Budget after Pre-billing Adjustments	\$	20,013,426.36	=C8 + C11
Unanticipated Collections**	\$	3,002.00	
TOTAL ADJUSTED BUDGET	\$	20,016,428.36	=C13+C14

Notes				
DOI Adjustments to Original Budget				
Refunds to Carriers*	\$	-	0.00%	Percentage of original budget
Carrier Population Adjustments†	\$	(460,518.00)	-2.30%	Percentage of original budget
Total Adjustments	\$	(460,518.00)	= C18+C19	Refunds + Adjustments
Actual DHW Carry Forward				
Operating Budget	\$	17,960,307.00	=C11+C21+C23	89.74% Assessment billed + adjustments + Actual carry forward
Assessments Collected YTD from Carriers	\$	8,880,528.75	49.45%	Percentage of operating budget after adjustments
Assessments Remaining to be Collected	\$	9,079,778.25	=C25-C27-C23	50.55% Operating budget - assessments collected - carry forward
Funds Transferred to IDHW			0.00%	Percentage of assessment collected
Funds Received by the IDHW				
Vaccine Expenditures				
Quarter 1			0.00%	Percentage of budget after adjustments
Quarter 2			0.00%	Percentage of budget after adjustments
Quarter 3			0.00%	Percentage of budget after adjustments
Quarter 4			0.00%	Percentage of budget after adjustments
Total Vaccine Expenditures	\$	-	=SUM(C34:C37)	0.00% Percentage of budget after adjustments
Funds remaining in the Dedicated Vaccine Fund	\$	-	=C31+C23-C38	0.00% Percentage of budget after adjustments

** See "Unanticipated Collections Detail" report

*See "Carrier Refund Detail" report

†See "Carrier Adjustment Detail" report

(Data as of 7/1/14)

7/14/2014

Adjustment Report: Adjustments to Survey, Refunds, Unanticipated Collections

	NAIC #	Company Name	# of Box B Dependents	Notes	Assessment \$	Assessment \$ Billed	# of Box B Dependents AFTER Revision	Assessment \$ After Revisions	Board Approval/Notified Date	Assessment \$ Rec'd	Notes
UNANTICIPATED COLLECTIONS											
added after vote	Carrier	BRIDGESPAN HEALTH CO - ID	0	added after asmt vote	\$ 79.00		27	\$ 2,133.00	notify 6/16/14	\$ 2,133.00	Added AFTER assessment vote
added after vote	Carrier	Pan-American Life Insurance	0	added after asmt vote	\$ 79.00	\$ -	11	\$ 869.00	notify 6/30/14	\$ 869.00	Added AFTER assessment vote
added after vote	Carrier	Blue Cross Blue Shield of Tennessee	0	added after asmt vote	\$ 79.00		902	\$ 71,258.00	approve 7/14/14	not yet paid	Added AFTER assessment vote
940								\$ 74,260.00			
REFUNDS											
		NONE									
ADJUSTMENTS TO SURVEY/ASSESSMENT											
	Carrier	BLUE SHIELD OF CALIFORNIA	854	from Anthem: On 4/8: CHANGE to 3265/751/0	\$ 79.00	\$ 67,466.00	751	\$ 59,329.00	Notify 4/15/14	\$ 59,329.00	They collected data from 2 separate systems, and it was not reconciled prior to initial submission.
	Reg Adm	Boulder Administrative Service, Inc	154	Pan American Life to pay for 11 Lives (stop loss); email of 6/12/14	\$ 79.00	\$ 12,166.00	143	\$ 11,297.00	notify 6/12/14	\$ 11,297.00	Pan-American Life said that they would report & pay for the 11 stop-loss lives.
	TPA	CATAMARAN PBM OF MARYLAND INC	332	per email 4-23-14 revise to zero; Rx only - is now on exempt list; keep here for accounting purposes	\$ 79.00	\$ 26,228.00	0	\$ -	Approve 5-5-14	\$ -	They should have indicated a "zero" response, but they mistakenly reported data based on pharmacy claims processed on behalf of our clients.
	TPA	CNIC HEALTH SOLUTIONS INC	130	per email on 5/6/14 to 382/126/0 from Vicki Es	\$ 79.00	\$ 10,270.00	126	\$ 9,954.00	notified board 5/6/14	\$ 9,954.00	Original response was based on dependents residing in Idaho and their associated subscribers. Report should have been produced for subscribers residing in Idaho and their associated dependents.
	TPA	HEALTHCARE MANAGEMENT ADMINISTRATORS INC	988	revise to 987 & \$77,973.00 per email 5/5/14	\$ 79.00	\$ 78,052.00	987	\$ 77,973.00	notified 5/5/14	\$ 77,973.00	Total from employers was 987, but person filling out survey entered 988 as B-number on original survey.
	TPA	HEALTHSCOPE BENEFITS INC	702	On 4-23-14 email came with revised survey - revise B num to 372.	\$ 79.00	\$ 55,458.00	372	\$ 29,388.00	APPROVE 5-5-14	\$ 29,388.00	Person doing survey picked up the wrong column of numbers from internal report when transposing the numbers onto the survey form.
	TPA	Meritain Health, Inc.	1771		\$ 79.00	\$ 139,909.00	1757	\$ 138,803.00	notified 6/12/2014	\$ 138,803.00	Calculation error date range on original survey; revised report uses correct date of January 31, 2014. This is why there is a slight difference in the lives that were reported in section A and section B.
	81264	NIPPON LIFE INSURANCE COMPANY OF AMERICA	37		\$ 79.00	\$ 2,923.00	29	\$ 2,291.00	notified 5/2/14	\$ 2,291.00	Original survey erroneously included 8 dep who were over 19 yr old
	Carrier	PREMERA BLUE CROSS	4651	Includes Lifewise Health Plan of Oregon	\$ 79.00	\$ 367,429.00	4646	\$ 367,034.00	notified 5/28/14	\$ 367,034.00	On the original survey, 5 dep WITHOUT immun cov were included in the B-number.
	Carrier	QBE INSURANCE CORPORATION	1276	5/7/14 email from John Svoboda to change to zero survey	\$ 79.00	\$ 100,804.00	0	\$ -	Approve 5-8-14	\$ -	Changed survey due to dep lives being reported by MS Admin, Employee Benefit Mgt, Boudier Admin & Meritain
	Carrier	REGENCE BLUESHIELD (WASHINGTON) (Cambia)	644	"A" number changed to 3507 per email 5/5/14; no change to "B" number	\$ 79.00	\$ 50,876.00	644	\$ 50,876.00	notify 5/9/14	\$ 50,876.00	"A" number changed to 3507 per email 5/5/14; no change to "B" number
Q	Carrier	REGENCE BLUESHIELD OF IDAHO, INC. (Cambia)	25980	changed to 112651/25953/33 per email 5/5/14	\$ 79.00	\$ 2,052,420.00	25953	\$ 2,050,287.00	notify 5/9/14		They discovered that the BridgeSpan immunization data was reported, however it was mistakenly embedded within the Regence data. Data difference is rather small, and impacted only two of Regence plans; Regence BlueShield of Idaho (RBSI), and Regence BlueShield (RBS), the Washington affiliate.
	TPA	TALL TREE ADMINISTRATORS, LLC	627	Revised survey for 8 additional lives	\$ 79.00	\$ 49,533.00	635	\$ 50,165.00	notify 6/16/14	\$ 50,165.00	Found 8 additional lives after survey first submitted; changed number on bill; asked for new survey
	Reg Adm	Trusteed Plans	393	email was sent to verify the 1384 number; one dependent child was found to be covered by both parents who work for the same company.	\$ 79.00	\$ 31,047.00	392	\$ 31,968.00	notify 6/6/2014	\$ 30,968.00	They discovered a dependent child that was covered by two employees within the same company. The name and date of birth were a little bit different so it was not detected in the original pass of looking for duplicate dependents but in review it was discovered that this was indeed the same dependent child andthey have since changed the information in their software system for future reference.

	Reg Adm	US Dairy Systems DBA Automated Dairy Systems	69	Paid thru UMR	\$ 79.00	\$ 5,451.00	0	\$ -	Notify 6/17/14	\$ -	was reported & paid by UMR
	TPA	WEBTPA EMPLOYER SERVICES, LLC	3784	2 revisions	\$ 79.00	\$ 298,936.00	134	\$ 10,586.00	Approve 6/27/14	\$ 10,586.00	New person doing survey; not understanding + making errors
			42,392				36,569				
						\$ 3,348,968.00	\$ 2,889,951.00				
						5,823	\$ 459,017.00				
						diff in dep	difference				
						additional	-940				
						Total difference in dependents:	4,883 fewer overall				



DEFENSE
HEALTH AGENCY

OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
HEALTH AFFAIRS
16401 EAST CENTRETECH PARKWAY
AURORA, CO 80011-9066

14-CODAB-004529

June 5, 2014

Mr. Michael M. Botan
Vice President, Government Contracts
UnitedHealthcare Military and Veterans
9800 Health Care Lane
MN006-E200
Minnetonka, MN 55343

Subject: Contract No. HT9402-12-C-0001 (West Region),
Certification of State Vaccine Programs as TRICARE-Authorized Providers

Dear Mr. Botan:

Over the past several months TRICARE has been researching the issues associated with reimbursement of State Vaccine Programs (SVPs) for state-supplied vaccines used to immunize TRICARE beneficiaries. The primary obstacle to reimbursement was that SVPs were not recognized as TRICARE-authorized providers. After a thorough review of this issue, a decision has been made that an SVP that meets certain requirements may be considered for TRICARE-authorized provider status as a supplier [of vaccines] under the "Other" category of provider, as delineated in 32 C.F.R. § 199.6(d)(5).

In order for an SVP to be considered for certification as a TRICARE-authorized provider, the following specific requirements must be met:

- The SVP must hold a valid National Provider Identifier (NPI) number;
- The SVP must enter into a participation agreement as delineated in TPM Chapter 11, Section 12.3, that, among other provisions, requires the provider to hold the TRICARE beneficiary harmless and not balance-bill (the SVP agrees to accept the lesser of the TRICARE allowed amount or the SVP-specific amount that is charged to other payers, as payment in full for the vaccines provided); and
- Beneficiary and vaccine specific claims must be filed for the vaccines used to immunize TRICARE beneficiaries, and the SVP must adhere to all other claim filing requirements as delineated in 32 C.F.R. § 199.

Many SVPs do not meet the last requirement above and, therefore, may not be certified as a TRICARE-authorized supplier. However, we have had discussions with the Washington Vaccine Association (WVA) which is the SVP for the state of Washington, and this SVP states that it is able to meet all of the above requirements. In addition, we have verified that the WVA

has obtained an NPI and because the WVA reimbursement amount for specific vaccines is, in general, less than the TRICARE allowed amount for the same vaccines, we anticipate that they would be willing to enter into the required participation agreement.

Effective May 20, 2014, the Director, DHA, has determined that SVPs that meet the above requirements may be recognized as TRICARE-authorized providers under 32 C.F.R. § 199.6(d)(5). If an SVP submits an application, signs a participation agreement, and is approved as an authorized provider, the effective date for reimbursement of appropriately submitted claims will be the date the SVP properly executes the participation agreement. We are currently in the process of drafting a TRICARE Policy Manual (TPM) change that will delineate the above requirements. Until the TPM change is published, however, United Healthcare Military & Veterans is directed to use the SVP certification requirements identified in this letter to process the WVA's application for TRICARE-authorized provider status as soon as it is received. Due to DHA's ongoing discussions with WVA and WVA's stated ability to currently comply with TRICARE's requirements, if WVA's application is approved, the effective date for coverage should be retroactive to May 20, 2014.

Please contact Dave McCloy at (303) 676-3583, or myself at (303) 676-3508 if you have questions about this.

Sincerely,



Charles L. Hargett
Contracting Officer

cc: CAPT Al Siewertsen, TRO-W Aurora Operations
Dave McCloy, TRO-W, COR
Mark Mantooth – OGC
Paul Hutter – OGC
Ann Fazzini – MB&RO
Barbara (Bobbie) Matthews – MB&RO

	B	C	D	E	F
1	4/1/2014				
2					
3					
4					
5					
6					
7					
8	Anticipated Carry Forward Balance	\$ 2,035,208.00			
9	Assessment as Voted	\$ 16,935,426.00			
10	Adjustments Between Vote and Billing	\$ (17,070.00)			
11	Assessment as BILLED	\$ 16,918,356.00	CHANGED to reflect 216,902 dependents X \$78		
12	Total Original Budget	\$ 18,970,634.00	=C8 + C9		
13	Total Budget after Pre-billing Adjustments	\$ 18,953,564.00	=C8 + C11		
14	Unexpected Collections**	\$ 47,917.36			
15	TOTAL ADJUSTED BUDGET	\$ 19,001,481.36	=C13+C14		
16	Notes				
17	DOI Adjustments to Original Budget				
18	Refunds to Carriers*	\$ (71,102.00)		-0.37%	Percentage of original budget
19	Carrier Population Adjustments†	\$ (87,981.00)		-0.46%	Percentage of original budget
20					
21	Total Adjustments	\$ (159,083.00)	= C18+C19		Refunds + Adjustments
22					
23	Actual DHW Carry Forward	\$ 2,570,984.00			
24					
25	Operating Budget	\$ 19,330,257.00	=C11+C21+C23	101.90%	Assessment billed + adjustments + Actual carry forward
26					
27	Assessments Collected YTD from Carriers	\$ 16,807,190.36		86.95%	Percentage of operating budget after adjustments
28	Assessments Remaining to be Collected	\$ (47,917.36)	=C25-C27-C23	-0.25%	Operating budget - assessments collected - carry forward
29	Funds Transferred to IDHW	\$ 16,683,443.36	SEE NOTE BELOW	99.26%	Percentage of assessment collected
30					
31	Funds Received by the IDHW	\$ 16,683,443.36	SEE NOTE BELOW		
32					
33	Vaccine Expenditures				
34	Quarter 1	\$ 8,929,474.00		46.19%	Percentage of budget after adjustments
35	Quarter 2	\$ 3,952,658.00		20.45%	Percentage of budget after adjustments
36	Quarter 3	\$ 3,291,858.00		17.03%	Percentage of budget after adjustments
37	Quarter 4			0.00%	Percentage of budget after adjustments
38	Total Vaccine Expenditures	\$ 16,173,990.00	=SUM(C34:C37)	83.67%	Percentage of budget after adjustments
39					
40	Funds remaining in the Dedicated Vaccine Fund	\$ 3,080,437.36	=C31+C23-C38	15.94%	Percentage of budget after adjustments
41					
42	** See "Unexpected Collections Detail" report				
43	*See "Carrier Refund Detail" report				
44	†See "Carrier Adjustment Detail" report				
45					
46	NOTE REGARDING FUNDS RECEIVED BY IDHW:				
47	\$123,747.00 from DakotaCare (4th quarterly payment) was received on 4/1/14 and will be included in the May transfer.				
48	(Data as of 4/1/14)				
49					

6/30/2014		CARRIER REFUND DETAIL REPORT												
Company Name	# of Box B Dependents	Assessment \$	# of Dependents After Revisions	Original Assessment \$ Billed	Assessment \$ After Revisions		Assessment \$ Rec'd After Revisions/Refunds	Pymt plan over \$50,000	1st Qtr. Payment	2nd Qtr. Payment	3rd Qtr. Payment	4th Qtr. Payment	Notes	
						Refunded Amt								
Key Benefit Administrators	160	\$78.00	160			\$ 200.00							overpayment was refunded	refund
LIFEWISE ASSURANCE COMPANY	645	\$78.00	0	\$ 50,310.00	\$ -	\$ 50,310.00							645 lives reported where included in Premera BC payment. Verified and refund processed for \$50,310.00	refund
LIFEWISE HEALTH PLAN OF OREGON INC.	216	\$78.00	0	\$ 16,848.00	\$ -	\$ 16,848.00							send email with revision and explanation	refund
Trusted Plans	334	\$78.00	343	\$ 26,052.00	\$ 26,754.00	\$ 156.00	\$ 26,754.00						Revision request for refund 8/20/13 - reported 2 more than should have been. Refund for \$156.00	refund
Group & Pension Administrators, Inc.	60	\$78.00	14	\$ 4,680.00	\$ 1,092.00	\$ 3,588.00	\$ 1,092.00						over paid, wants refund. Board reviewing. 5/16/13, refunding \$3,588.00 as requested, ok by board and fiscal. (46 fewer)	refund
					REFUND TOTAL:	\$ 71,102.00								

		CARRIER ADJUSTMENT DETAIL REPORT												
Company Name	# of Box B Dependents	Assessment \$	# of Dependents After Revisions	Original Assessment \$ Billed	Assessment \$ After Revisions		Assessment \$ Rec'd After Revisions/Refunds	Pymt plan over \$50,000	1st Qtr. Payment	2nd Qtr.	3rd Qtr. Payment	4th Qtr. Payment	Notes	
						Amt of Adjustment								
Key Benefit Adminstrators	160	\$ 78.00	160	\$ 12,480.00	\$ 12,480.00	\$ (200.00)	\$ 12,680.00						overpayment	
LIFEWISE HEALTH PLAN OF OREGON INC.	331	\$ 78.00	216	\$ 25,818.00	\$ 16,848.00	\$ 8,970.00	\$ 16,848.00						Adjustment was made before refund was requested	
TALL TREE ADMINISTRATORS, LLC	619	\$ 78.00	582	\$ 48,282.00	\$ 45,396.00	\$ 2,886.00	\$ 45,396.00						included 37 termed members in initial report. Paid for 582 instead of 619	
SELECTHEALTH, INC	726	\$ 78.00	693	\$ 56,628.00	\$ 54,054.00	\$ 2,574.00	\$ 54,054.00						changed # dependents (33 fewer)	
EMPLOYEE BENEFIT MANAGEMENT SERVICES INC	811	\$ 78.00	803	\$ 63,258.00	\$ 62,634.00	\$ 624.00	\$ 62,634.00						adjusted by 8 members due to group being counted that had terminated.	reduction
CONSOLIDATED HEALTH PLANS, INC	9	\$ 78.00	4	\$ 702.00	\$ 312.00	\$ 390.00	\$ 312.00						removed 5 due to student non renewable policy excluded from statute.	reduction
CNIC HEALTH SOLUTIONS INC	66	\$ 78.00	32	\$ 5,148.00	\$ 2,496.00	\$ 2,652.00	\$ 2,496.00						included termed member in original calculation by mistake (34 fewer)	reduction
Blue Cross and Blue Shield of Minnesota	4040	\$ 78.00	4041	\$ 315,120.00	\$ 315,198.00	\$ (78.00)	\$ 315,198.00						adjusted - increased by 1.	additional
Deseret Mutual	714	\$ 78.00	0	\$ 55,692.00	\$ -	\$ 55,692.00							removed 714 due to student non renewable policy (BYU Idaho) excluded from statute	reduction
CIGNA - TPA	1814	\$ 78.00	1,814	\$ 141,492.00	\$ 141,492.00	\$ -	\$ 141,492.00						Kristen Thomas @ CIGNA called to let me know that they had not reported their TPA membership for 2013. Sent assessment on 7/29/13. (Late Pay)	additional funds - this was not in the original survey
Washington Department of Health - Immunization Program	295	\$ 78.00	295	\$ 23,010.00	\$ 10,489.00	\$ 12,521.00	\$ 10,489.00						was billed \$23,010.00. Overpaid for 2012 \$12,521.00 so was credited that amount for 2013	reduction

SELF INSURED SERVICES COMPANY	27	\$ 78.00	22	\$ 2,106.00	\$ 1,716.00	\$ 390.00	\$ 1,716.00							dependents reduced by 5	reduction	
Meritain Health, Inc.	1476	\$ 78.00	1,456	\$115,128	\$113,568	\$ 1,560.00	\$113,568.00							dependents reduced by 20	reduction	
				\$ 735,150.00	\$ 776,683.00	\$ 87,981.00	\$ 776,883.00									
						Total Adjustment - less than original survey										

Company Name	# of Box B Dependents	UNANTICIPATED COLLECTIONS				Assessment \$ After Revisions	Assessment \$ Rec'd After Revisions/Refunds
		Assessment \$	# of Dependents After Revisions	Original Assessment \$ Billed			
United Healthcare (2010)	0	\$ 47.00	460			\$ 21,620.00	\$ 21,620.00
United Healthcare (2011)	0	\$ 58.18	452			\$ 26,297.36	\$ 26,297.36
					Total:	\$ 47,917.36	\$ 47,917.36

SFY2015 Vaccine Assessment AS VOTED
April 7, 2014

	A	B	C
1	SFY 2015 Vaccine Assessment Calculations		
2	Base assessment cost ¹	\$17,561,170	=(33464762*B14)*1.00535
3	Actual assessment portion of flu prebook cost	\$1,449,181	=1494772*0.9695
4	Vaccine price variability adjustment factor (3%)	\$546,152	=B2*0.0311
5	Total SFY2015 Funding Need	\$19,556,504	=SUM(B2:B4)
6	Unanticipated collections during SFY2014 ²	(\$47,917)	
7	Carryover of unspent funds from SFY2014	(\$1,046,755)	
8	Total adjustment from 2014 to be deducted from 2015 assessment	(\$1,094,672)	=SUM(B6:B7)
9	State Fiscal Year 2015 Assessment	\$18,461,832	=B5+B8
10			
11			
12	CY2013 Idaho population 0 through 18 years ^{3,5}	447,699	=446562+1137
13	SFY2015 Assessment Survey, covered Idaho children ^{4,6}	233,687	=233175+512
14	Percent of Idaho children covered by the assessment	52.2%	=B13/B12
15			
16			
17	Per child assessment for SFY2015	\$79.00	=B9/B13
18			
19			
20			
21			
22	¹ This amount includes; 1) a 1-year cost averaged from 2 years of vaccine cost data, 2) an actual 2.14% increase in federal vaccine contract pricing, and 3) a further increase of 1/4 of this year's price increase to allow for the one quarter of the 2015 assessment year that will be paid based on 2016 vaccine contracts, 4) does not include flu vaccine.		
23	² Includes back payments from insurers in Idaho.		
24	³ Estimate provided by Vital Records staff.		
25	⁴ Provided by the Idaho Dept. of Insurance.		
26	⁵ Includes 1,137 Washington children who receive vaccines in Idaho.		
27	⁶ Includes 512 insured Washington children who receive vaccines in Idaho, based on their current ratio of 55% federally eligible, 45% insured children.		

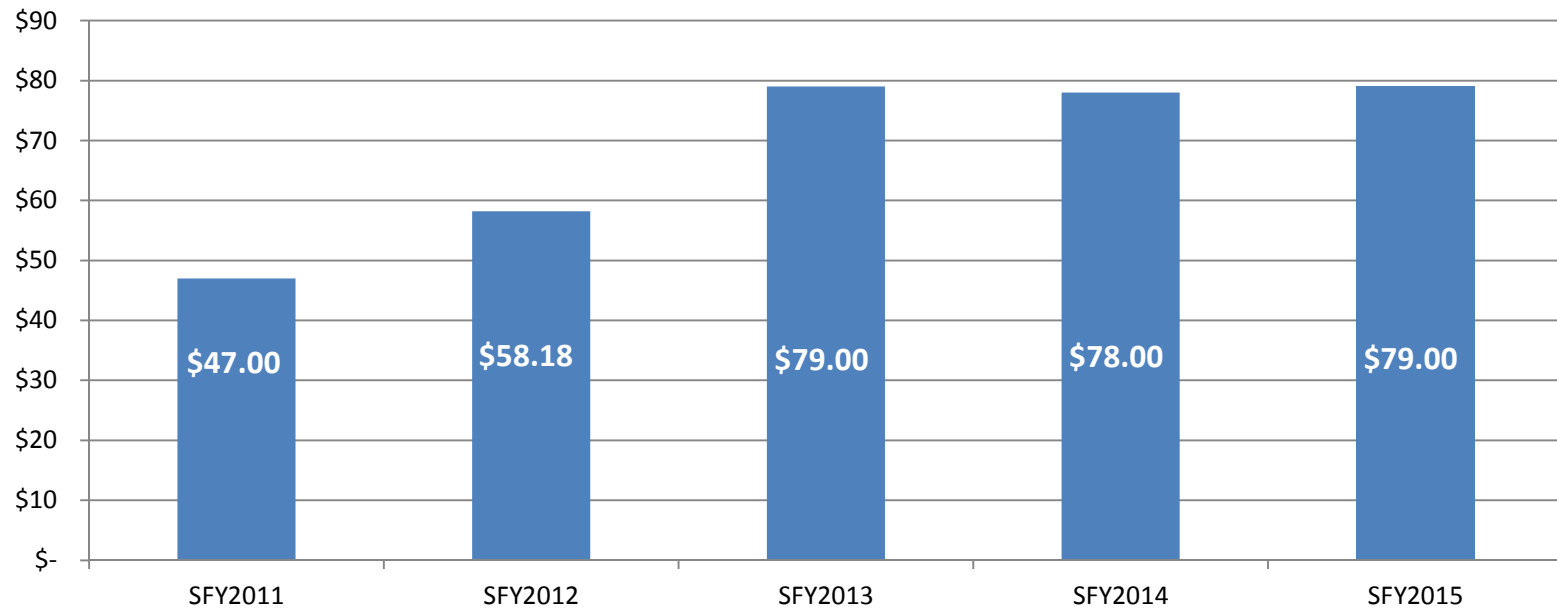
1-year vaccine cost calculated from 24 months of data on vaccines distributed, using costs from the April 1, 2014 CDC vaccine contracts

The SFY2015 vaccine assessment will include one quarter of the new vaccine contract year which will begin on April 1, 2015. 25% of this year's contract price increase in built is as a hedge against next year's contract increase. $2.14/4 = .535$

$$=(33464762 * B14) * 1.00535$$

Percentage of Idaho's children who are covered by insurance as determined by the DOI annual survey

Vaccine Assessment - Annual Cost Per Child 2011 - 2015



2011 Vaccine Types

DTaP, Hib, Polio
Hepatitis A & B
Meningococcal
MMR, Tdap
Pneumococcal
Rotavirus, Varicella

Additional Vaccines for 2012

HPV - Females only
Flu - (partial)

Additional Vaccines for 2013

HPV - Everyone
Flu - Everyone

Additional Vaccines for 2014

No Additional

Additional Vaccines for 2015

MenHibRix