

Idaho Immunization Assessment Board
Board Meeting Minutes
Monday, December 7, 2015
Department of Insurance, 700 W. State St., Boise, ID – 3rd Floor Conference Room A

Board Members Present:

- Ted Epperly, M.D. - Family Medicine Residency of Idaho – Chair
- Chris Pickford – Boise School District – Vice Chair
- Christine Hahn, M.D. – Idaho Department of Health & Welfare
- Richard Rainey, M.D. – Regence BlueShield of Idaho
- Brian Fellner – Blue Cross of Idaho

Board Members Absent:

- Dean Cameron, Director – Idaho Department of Insurance
- Mike Hodge - Albertsons LLC & New Albertsons Inc.
- Fred Martin – Idaho Senate
- Jeff Thompson – Idaho House of Representatives
- Unfilled board member position

Others Present:

- Rafe Hewett—Idaho Department of Health & Welfare
- Tamaire Olson—Idaho Department of Health & Welfare
- Elaine Mellon – Idaho Department of Insurance
- Christian Buhler—Pfizer
- Ben Wright—Ameriben (by conference call)

Call to Order: Chairman Dr. Ted Epperly called the meeting to order at 3:05 PM MST.

Approval of Minutes from October 5, 2015 meeting:

Minor changes and typos were corrected. Motion to accept minutes made by Dr. Christine Hahn; motion seconded by Dr. Chris Pickford. Motion passed unanimously. Quorum was present.

Financial Report: Elaine Diner presented the **Adjustment Report (see attached)** and related Financial Report.

EBSO paid the assessment and we also received payment from SelectHealth for the 2014 assessment (this was an “unanticipated collection” shown on the adjustment report).

On the refund requested by Symetra, Elaine can verify only 53 lives so far.

If the company has reported on a survey, Elaine can verify that; if the company has not reported, the verification requires that she contact a specific individual at the company; that person has to be able to pull data and be responsible for sending in the survey. Symetra was unable to provide much contact information at those companies. Elaine will ask for help from the Dept. of Insurance in getting the contact information. Dr. Rainey will help Elaine with the list because he knows a lot about the Blue Cross Blue Shield plan names. Dr. Epperly asked for an update at the next board meeting

Financial Report: (see attached) as of 12/4/15. At the bottom of the financial report overview, there is a list (in red), titled “NOTES” which give some explanation of significant details relating to the report. We have about \$3.7 million in quarterly payments that is due December 15, 2015 and March 15, 2016.

Line 15 on the financial report shows over \$1 million in unanticipated collections.
Line 19 (refunds) has remained the same since the last report (\$14,258).
Line 20 shows carrier population adjustments which are reduced by 262,340 (reduced from the assessment as voted).
Line 28 (Assessments Collected YTD from Carriers) is \$12,337,237.
Line 29 (Amounts to be Collected to Achieve Operation Budget) is \$2,471,451 which will be met because there are quarterly payments of \$3.7 million due.

Line 39 (Vaccine Expenditures) are totaling almost \$5.9 million. We have two more quarters of expenditures. We have almost \$8.8 million remaining in the Dedicated Vaccine Fund (Line 41).

Dr. Ted Epperly asked Dr. Chris Hahn and Tamaire Olson of the Dept. of Health & Welfare (DHW) if they anticipate spending all of the funds in the Dedicated Vaccine Fund in the next 2 quarters. They answered that so far the orders for Meningococcal B vaccine have been small and typically there is a slow increase in usage in the first 2-3 years after a new vaccine is added to the CDC recommendations, so they anticipate that there will be carry-over of funds into next fiscal year.

Old Business:

2014 Assessment - follow-up

Elaine reported that when SelectHealth paid, she asked Monty Borrowman at SelectHealth if there were any other non-reported plans for the years 2011 to 2015; he said that there were not.

At the last meeting, the board asked for an update on the non-responders to the survey for 2015. Elaine prepared a list showing that many of the non-responders had previously (i.e. on the 2014 survey) reported all zeros. The non-responders that are of concern are the 3 new TPAs and the self-administered plans. The board directed Elaine Diner to work with the Dept. of Insurance (DOI) to locate additional contact information for these plans and send them a letter from the DOI.

There was a brief discussion about self-administered plans (i.e. self-funded plans that did not use a third-party administrator (TPA) and had their own in-house administrator. Ben Wright from Ameriben offered to do some research and bring more information about self-administered plans to the next board meeting. Elaine Mellon, Dept. of Insurance will also check for information.

New Business:

TRICARE Update: Rafe Hewitt, program manager for Immunizations has held regular phone meetings with KidsVax which provides administrative services for not-for-profit, government and quasi-governmental entities, specializing in funding for childhood immunizations over the past 12 years. The State of Idaho has a one-year contract with KidsVax to maintain the two-conversation with the Dept. of Defense (Federal), and included in that is Tricare, which has refused to pay the assessment. Tricare covers children of military members. These children receive medical care both on and off base. KidsVax and the Dept. of Health & Welfare provide information about these services to the Dept. of Defense.

KidsVax has proposed federal legislation as part of the National Defense Authorization Act (NDAA) to be effective in 2017 for Tricare to pay its share of the Immunization assessment in the states that have an immunization assessment program. KidsVax is gathering support among the assessment states.

Brian Fellner asked if Tricare was paying anything to the assessment fund now. Dr. Chris Hahn explained that Tricare is not paying anything to the fund now. Each year she and the DHW have to ask the Idaho legislature for money to go into the assessment fund to cover the Tricare children who are receiving free vaccines. The amount is approximately \$600,000 per year that the Idaho Legislature is paying for the TRICARE children that are getting vaccinations off base.

Rafe Hewitt handed out a document about KidsVax – TRICARE Multi-State Efforts (see attached)

Next meeting:

Monday, February 8, 2016 – Department of Insurance, Conference Room 3A, 700 W. State St, Boise, ID at 3:00 PM MST.

Agenda Topics for next meeting:

1. Self-Administered plans – information
2. Non-responders - update
3. TRICARE update RE: KidsVax

Adjournment:

Motion to adjourn made by Dr. Chris Hahn; motion seconded by Dr. Rich Rainey. Board voted unanimously to adjourn. Quorum was present. Meeting adjourned at 4:10 PM MST.

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

Attachments (handouts presented at meeting):

1. Adjustment Report
2. Financial Report
3. KidsVax TRICARE Multi-State Efforts

ADJUSTMENT REPORT - DETAIL

Idaho Immunization Assessment

2015	Type	Company Name	# of Box B Dependents	Notes	Assessment \$	Assessment \$ Billed	# of Box B Dependents AFTER Revision	Assessment \$ After Revisions	Board Approval/Notified Date
ADJUSTMENTS TO SURVEYS									
	Reg Admin	EBSO, Inc	81	one client was erroneously included in original survey	\$ 65.00	\$ 5,265.00	80	\$ 5,200.00	notified 12/2/15
	TPA	Aetna Health Management LLC	9722	sent letter to explain; included one plan in error	\$ 65.00	\$ 631,930.00	9514	\$ 618,410.00	Notified 9/15/2015
NOT ISSUED; needs verification & refund \$64,350	Carrier	SYMETRA LIFE INSURANCE COMPANY	996	Previously wrote only stop-loss written; new product (MEC) has a few lives for health benefits	\$ 65.00	\$ 64,740.00	6	\$ 390.00	voted at meeting 7/20; contingent on verification of TPAs having reported
never paid; no refund needed	TPA	ENVISION PHARMACETICAL SERVICES LLC	1306	New TPA in Idaho; RX only	\$ 65.00	\$ 84,890.00	0	\$ -	voted at meeting 7/20
	TPA	WORLDWIDE INSURANCE SERVICES, INC	138	incorrectly included other ins. product	\$ 65.00	\$ 8,970.00	10	\$ 650.00	notified at meeting 7/20
	Reg Adm	CAPITOL ADMINISTRATORS, INC	17	Southern Utes Indian Tribe and Puyallup Indian Tribe. That made up 13 of invoiced counts.	\$ 65.00	\$ 1,105.00	4	\$ 260.00	notified at meeting 7/20
	TPA	HARRINGTON HEALTH SERVICES, INC.	5	used old data on first count	\$ 65.00	\$ 325.00	0	\$ -	notified at meeting 7/20
	TPA	Blue Cross Blue Shield of WY -TPA Accounts	189	20 yr olds accidentally included	\$ 65.00	\$ 12,285.00	164	\$ 10,660.00	notified 6/1
	Carrier	BLUE CROSS BLUE SHIELD of WYOMING (carrier)	97	20 yr olds accidentally included	\$ 65.00	\$ 6,305.00	84	\$ 5,460.00	notified 6/1
	TPA	Meritain Health, Inc.	1334	Double reporting with BC Idaho; verified with BC Idaho	\$ 65.00	\$ 86,710.00	812	\$ 52,780.00	voted on 5/21
	TPA	SELF INSURED SERVICES COMPANY (Cottingham & Butler)	32	reported from 2014 data instead of 2015 data	\$ 65.00	\$ 2,080.00	26	\$ 1,690.00	notified 5/20
	TPA	SHASTA ADMINISTRATIVE SERVICES	23	Cascade Windows \$130: CTGR - Emilee \$130.	\$ 65.00	\$ 1,495.00	4	\$ 260.00	notified 5/20
	TPA	WEBTPA EMPLOYER SERVICES, LLC	543	mistakenly counted tribal children	\$ 65.00	\$ 35,295.00	35	\$ 2,275.00	Approval at IAB meeting 5/21/2015
	TPA	WILLIAM MICHAEL STEMLER INC dba: Delta Health Systems	146	duplicate entry	\$ 65.00	\$ 9,490.00	0	0	VOTED 5/21
	TPA	WILLIAM MICHAEL STEMLER INC DBA: DELTA HEALTH SYSTEMS	146	Reported under Anthem (BC of CA) email of 4-21-15	\$ 65.00	\$ 9,490.00	0	0	VOTED 5/21
						\$ 960,375.00		\$ 698,035.00	
								Difference	\$ 262,340.00

2015	other years	Type	Company Name	# of Box B Dependents	Notes	Assessment \$	Assessment \$ Billed	# of Box B Dependents AFTER Revision	Assessment \$ After Revisions	Board Approval/Notified Date
Unanticipated Collections (after survey vote)										
late survey	2014	TPA	SELECTHEALTH	6871	for self-funded plans	\$ 79.00	\$ 542,809.00			notified at Board Meeting 10/5
2015 late survey		Carrier	BLUE CROSS BLUE SHIELD OF LOUISIANA	47	no interest charged	\$ 65.00	\$ 3,055.00			notified 9/15/15
late survey	2011	Carrier	BLUE CROSS BLUE SHIELD OF LOUISIANA	37	\$2152.66 + 1033.28	\$ 58.18	\$ 3,185.94			notified 9/15/15
late survey	2012	Carrier	BLUE CROSS BLUE SHIELD OF LOUISIANA	35	\$2765 + 995.40	\$ 79.00	\$ 3,760.40			notified 9/15/15
late survey	2013	Carrier	BLUE CROSS BLUE SHIELD OF LOUISIANA	33	\$2574 + 308.88	\$ 78.00	\$ 3,191.76			notified 9/15/15
late survey	2014	Carrier	BLUE CROSS BLUE SHIELD OF LOUISIANA	37	\$2923 +350.76	\$ 79.00	\$ 3,273.76			notified 9/15/15
late survey		SF	St. Luke's Health System (Select Health)	6409	self funded plan on list from SelectHealth TPA	\$ 65.00	\$ 416,585.00			notified 7/20 at meeting
late survey		SF	Jacobsen Construction	9	self funded plan on list from SelectHealth TPA	\$ 65.00	\$ 580.00			notified 7/20 at meeting
late survey		SF	Intermountain Healthcare (Select Health)	417	self funded plan on list from SelectHealth TPA	\$ 65.00	\$ 27,105.00			notified 7/20 at meeting
late survey		SF	Clear Springs Foods Inc (SelectHealth)	230	self funded plan on list from SelectHealth TPA	\$ 65.00	\$ 14,950.00			notified 7/20 at meeting
late survey		SF	First Federal Savings Bank (SelectHealth)	123	self funded plan on list from SelectHealth TPA	\$ 65.00	\$ 7,995.00			notified 7/20 at meeting
late survey		SF	Petersen, Inc (Select Health)	57	self funded plan on list from SelectHealth TPA	\$ 65.00	\$ 3,705.00			notified 7/20 at meeting
late survey		SF	IM Flash Technologies (Select Health)	14	self funded plan on list from SelectHealth TPA	\$ 65.00	\$ 910.00			notified 7/20 at meeting
Late survey		SF	Admiral Beverage (Select Health)	5	self funded plan on list from SelectHealth TPA	\$65.00	\$ 325.00			notified 7/20 at meeting
Late survey		SF	ATK (Alliant Techsystems Inc. Employee Welfare Benefits Plan (Select Health)	4	self funded plan on list from SelectHealth TPA	\$ 65.00	\$ 260.00			notified 7/20 at meeting
Late survey		TPA	MMSI INC (Mayo Clinic Health Solutions)	4	late survey	\$ 65.00	\$ 260.00			notified 7/20 at meeting
Late survey		SF	Resource Management Inc (Select Health)	4	self funded plan on list from SelectHealth TPA	\$ 65.00	\$ 260.00			notified 7/20 at meeting
Late survey		Carrier	BLUE CROSS BLUE SHIELD OF MICHIGAN	724	late survey	\$ 65.00	\$ 47,060.00			notified 4/27
Late survey		TPA	CYPRESS BENEFIT ADMINISTRATORS LLC/Western Grocers	23	late survey	\$ 65.00	\$ 1,495.00			notified 4/27
Late survey		TPA	FIRST CHOICE HEALTH ADMINISTRATORS	119	late survey	\$ 65.00	\$ 7,735.00			notified 5/13
Late survey		TPA	LIFETIME BENEFIT SOLUTIONS, INC.	128	late survey	\$ 65.00	\$ 8,320.00			notified 4/27
Late survey		TPA	PERSONAL INSURANCE ADMINISTRATORS, INC.	3	late survey	\$ 65.00	\$ 195.00			notified 5/13

2015		Type	Company Name	# of Box B Dependents	Notes	Assessment \$	Assessment \$ Billed	# of Box B Dependents AFTER Revision	Assessment \$ After Revisions	Board Approval/Notified Date	
REFUNDS											
		TPA	Aetna Health Management		refund of overpayment after survey adjustment		\$ (13,520.00)			notified 9/15	
		TPA	AETNA HEALTH OF UTAH, INC: ALTIUS HEALTH (TPA)		refund of overpayment		\$ (90.00)			notified 6/4	
		Carrier	Washington Department of Health - Immunization Program		refund of overpayment		\$ (648.18)			voted 5/21	
							\$ (14,258.18)				

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7					
8					
9	Carry Forward Balance	\$ 2,882,942.00			
10	Assessment as Voted	\$ 15,225,405.00	234,237 dependents X \$65.		
11	Adjustments Between Vote and Billing	\$ (140,118.14)			
12	Assessment as BILLED	\$ 15,085,286.86			
13	Total Original Budget	\$ 18,108,347.00	=C9 + C10		
14	Total Budget after Pre-billing Adjustments	\$ 17,968,228.86	=C9 + C12		
15	Unanticipated Collections**	\$ 1,097,015.86			
16	TOTAL ADJUSTED BUDGET	\$ 19,065,244.72	=C14 + C15		
17					Notes
18	DOI Adjustments to Original Budget				
19	Refunds to Carriers*	\$ (14,258.18)		-0.08%	Percentage of original budget
20	Carrier Population Adjustments†	\$ (262,340.00)		-1.45%	Percentage of original budget
21					
22	Total Adjustments	\$ (276,598.18)	= C19 + C20		Refunds + Adjustments
23					
24	Actual DHW Carry Forward	\$ 2,882,942.00			
25					
26	Operating Budget	\$ 17,691,630.68	=C12 + C22 + C24	97.70%	Assessment billed + adjustments + Actual carry forward
27					
28	Assessments Collected YTD from Carriers	\$ 12,337,237.75		69.73%	Percentage of operating budget after adjustments
29	Amounts to be Collected to Achieve Operation Budget	\$ 2,471,450.93	=C26 - C28 - C24	13.97%	Operating budget - assessments collected - carry forward
30	Funds Transferred to IDHW	\$ 11,794,428.75		95.60%	Percentage of assessment collected
31					
32	Funds Received by the IDHW	\$ 11,794,428.75			
33					
34	Vaccine Expenditures				
35	Quarter 1	\$ 1,839,664.00		10.40%	Percentage of budget after adjustments
36	Quarter 2	\$ 4,057,465.00		22.93%	Percentage of budget after adjustments
37	Quarter 3	\$ -		0.00%	Percentage of budget after adjustments
38	Quarter 4			0.00%	Percentage of budget after adjustments
39	Total Vaccine Expenditures	\$ 5,897,129.00	=SUM(C34:C37)	33.33%	Percentage of budget after adjustments
40					
41	Funds remaining in the Dedicated Vaccine Fund	\$ 8,780,241.75	=C32 + C24 - C39	49.63%	Percentage of budget after adjustments

** See "Unanticipated Collections Detail" (Adjustment Report)
 *See "Carrier Refund Detail" (Adjustment Report)
 †See "Carrier Adjustment Detail" (Adjustment Report)

Notes: (1) Symetra Refund has not been paid out (\$64,350) waiting to verify changes to survey;

(2) Outstanding assessment from BCBS-LA was due 11/15/15: \$16,466.86 for Assmt + interest

(3) Outstanding quarterly assessment payments, due 12/15/15 and 3/15/16: \$3,769,236.25

(4) Payment from SelectHealth \$542,809 received 12/3/15; will be transferred to IDHW at end of December.

(data as of 12/4/15)



Administering Programs
to Fund Vaccines

TRICARE Multi-State Efforts:

November 2015 Update

During the week of November 9-13, KidsVax, LLC (KV) managing member Fred Potter and associate general counsel, Julia Walter, traveled to Washington, D.C. to represent KV state vaccine program client interests in a series of in-person meeting with legislative staffers, congressional representatives, and TRICARE's office of General Counsel.

We are happy to report that our week proved fruitful as KV, largely aided by the efforts of the Washington Vaccine Association's outside lobbying firm Crowell & Morning, was able to gain firm commitments from legislative aids—specifically, Adam Goodwin, Senator Murray's Military Legislative Assistant; Jonathon Pawlow, Representative Smith's Legislative Director, and Bryan Maxwell, Senator Shaheen's Military Legislative Assistant—to support our proposed statutory mandate for inclusion in the 2016 National Defense Authorization Act that TRICARE pay it's equitable share of the cost for its beneficiaries under state universal vaccination programs. Mr. Goodwin agreed to take the lead in editing the proposed language to ensure its widespread palatability and support amongst other policymakers. While he confirmed that recompense of the arrearage owed by TRICARE to universal states remains more problematic than gaining TRICARE's prospective payment, he agreed to advance both causes.

Moving forward, legislative staff have asked that we broaden our approach to include as many senators and representatives in states supporting universal vaccine purchase as possible to build a bipartisan coalition that will ensure continuing support through the drafting and mark-up process. KV intends to return to Washington D.C. in early December to meet with all legislative staffers who have expressed an interest in supporting our cause to provide additional subject matter expertise and to reinforce Crowell & Morning's advocacy. Specifically, KV intends to make overtures to Idaho and Alaska's congressional delegations to gage their willingness to join the coalition. Further plans include writing to the as of yet unapproached universal states not administered by KV to determine if they, too, would be willing to write letters in support of our efforts. These measures are anticipated to bring heightened awareness to this issue and put pressure on the Department of Defense to find a resolution.

While in Washington, KV scheduled an in-person meeting with TRICARE's Office of General Counsel (OGC) specifically to address potential avenues for TRICARE's participation in universal states utilizing a per capita or population-based assessment mechanism—namely, Idaho, New Hampshire, Maine, Vermont, Rhode Island, and Alaska. Prior to our meeting, KV had prepared and sent the OGC a letter on behalf of Idaho noting the assessment owed and detailing the State's imminent discontinuation the approximate \$600,000 annual funding of vaccines for TRICARE enrollees. While the meeting began under tense conditions as Bryan Wheeler, who had been acting general counsel until early this month, recited a litany of federal codes and regulations that made payment impossible, Paul Hutter, TRICARE's current general counsel who had been out on a temporary assignment as interim Deputy Director, quickly

restored the positive tone that had been prevalent during the period of time that we made steady progress with OGC, (now over a year ago). Mark Mantooth, another OGC attorney who appears to have consistently provided the technical legal support throughout this work, was also in attendance.

Following initial tense exchanges and positioning, we promptly moved towards more positive discussion that was followed by nearly an hour of brainstorming. Astoundingly, part of the turn from negative to positive analysis on TRICARE's part was facilitated by correction of a stunning misconception. Apparently, TRICARE management has mistakenly assumed that civilian TRICARE authorized providers have been administering vaccines to TRICARE enrollees using TRICARE sourced and purchased vaccine stock. It became clear that TRICARE OGC had no comprehension of how vaccine procurement and delivery systems work in universal states. Thankfully, New Hampshire, which does not have any TRICARE military medical facilities in the state, provided the stark example as to how, literally, the only childhood vaccine available in pediatric offices, is state-supplied vaccine paid for by the New Hampshire Vaccine Association. Once that realization dawned, and Mr. Wheeler confirmed yet again, that WVA and other universal vaccine program states have all-in costs below TRICARE's allowable charges, they went on to note how resolution of this matter, particularly in the per capita states, would not only save in vaccine costs, but also save in administrative costs. KV further explained that creating a dosage-based claims assessment system for only TRICARE in existing per capita states would be problematic not only for administration purposes, but likely lead to heightened CDC scrutiny and possibly jeopardize state departments of health's ability to source off the CDC contract due to the prohibition on the resale of such vaccines.

By the end of the meeting, Paul Hutter offered to press management again to come to a "single-state solution" for its equitable share of assessments in all states with universal purchase programs. He asked for some further detailed documentation on behalf of the state assessment programs that are part of the current multi-state working group, which KV intends to assemble promptly. Of chief concern to Mr. Hutter was his ability to "sell" a solution to those with decision-making authority. He expressed an interest in having KV continue to build support in Congress to facilitate any regulatory or statutory changes that may be required to reach a solution. Mr. Hutter also adjusted his schedule to set December 3 as the next date for a follow-up conference call in which each of us will report on progress from our meeting take-aways.

While KidsVax has prepared additional FOIA requests to submit to the Defense Health Agency (DHA) on behalf of Idaho to determine the most recent TRICARE-related vaccine data, we believe that it would be beneficial to allow Mr. Hutter to further his internal efforts before resorting to external methods to garner information. Ideally, KV would like to gain access to the DHA's own data analyst to verify our vaccine expenditure calculations.

Though KV is pleased to have advanced our clients' interests, we believe it is critical to follow-up on this matter, as it is clear we have garnered TRICARE's attention. We

intend to continue to coordinate the multistate efforts and utilize our collective resources to maximize impact. We look forward to sending another report following our next in-person meetings in Washington at the beginning of December.

Respectfully,



Julia G. Walter
Associate General Counsel
Kidsvax

