

Washington Vaccine Association Operations Committee Meeting December 5, 2019; 1:00-1:30 p.m. PDT

I. Attendance. Participating in all or part of the meeting by telephone were the following individuals:

Members

SheAnne Allen, Department of Health Tracey Cardillo, Cigna Nicole Carroll, United Healthcare Steve Lam, PharmD, Regence Helms & Company, Inc.
Patrick Miller, Principal

<u>KidsVax</u>®

Terry Mills, Executive Assistant

WVA

Julia G. Zell, Esq., Executive Director, Chair

II. Minutes

Welcome and Introductions

At 1:00 p.m., Chairperson Julia Zell called the meeting to order. The purpose of the meeting is to introduce everyone to Helms & Company, who will be the new administrative services provider to WVA beginning January 1, 2020.

Financial Update

Ms. Zell indicated that like the old process, WVA will provide a draft assessment grid. It is anticipated that WVA will be able to absorb inflation costs in the ongoing year. WVA is fully reserved partly due to the TRICARE settlement in which TRICARE paid their arrears owed to WVA. Given WVA's liquidity, Ms. Zell believes the assessment grid can be taken down again. WVA is attempting to hold the grid steady as payers have articulated in the past, they would prefer fewer adjustments to the assessment grid versus the up and down, allowing for better predictability. Ms. Zell mentioned that if anyone is interested in additional information, WVA's Finance Committee makes the decisions concerning what WVA's reserve goals are and how to adjust them on a periodic basis. Those meetings are posted on WVA's website at www.wavaccine.org. All 2020 meetings have been posted on the website.

Operations Updates

Ms. Zell provided a brief update regarding the transition from KidsVax ("KV") to Helms & Company ("Helms") beginning January 1, 2020. After an exhaustive search, Helms was selected to handle WVA's back office work, including projections, customer service, and other tasks not handled by Ms. Zell specifically. She explained that there will be some changes on the provider side, whereas Helms will have a full-time person that will be handling the inquiries coming in day to day. WVA also recently had its website updated, so different content will continue to be added to that as well. The News and Notices will remain in the same place so that payers will continue to receive a reminder of the draft assessment grid. Helms has a lot of experience with vaccine associations and have collectively, years and years of payer and provider experience. Ms. Zell is excited to have them on the team.

Mr. Miller expressed Helm's excitement about working with WVA as well. From a payer's perspective, Mr. Miller explained that initially things will look the same in terms of not changing phone numbers, email addresses, the lockbox, etc. At a recent visit with WVA's Board, Mr. Miller explained that while it looks the same today, Helms is actively working on some items on the back end that will be beneficial to the payers, WVA, and the Department of Health ("DOH"). Technology has been implemented that will take all the documents that go to the lockbox, i.e., EOBs, checks, and correspondence related to the DBA claim process and image all of those and then extract off that approximately 25 data points. This process with give the customer service people more of a real time view of what has been sent there, but it also provides a fair amount of analytic capacity to look at the data. Mr. Miller has had a number of discussions with the DOH in ways that Helms can partner with them moving forward. Additionally, in

2020, Helms would like to move into looking at how WVA can move away from the paper-based EOB process and move more to an automated 835 process. Helms believes this process will be a great value to the payers in terms of being able to move from paper to electronic. It will reduce several lags that exist through the lockbox. There are also a number of upstream activities that Helms is looking at. One of the things that the analytic platform provides is the ability to take a look at the pricing grid in terms of what is on the grid versus what is actually being processed on the charge and payment side. Helms is hoping to work more proactively with some of the providers that might not be up to date on the grid and potentially some of the smaller payers that are not necessarily up to speed.

Mr. Miller offered to meet with anyone individually or as a group going forward and would like to develop a strong collaboration between Helms & Company and the payer community, as they have been developing with the DOH.

Ms. Zell reported that one of the things that attracted the Board to Helms was the fact that they had a proposal that included taking a lot of the paper EOBs and payments and putting them on an automated platform. This plan should give WVA a lot more feedback and close some of the time lag that currently exists as far as its revenue cycle and provide a better idea of what those estimated assessment levels should be. In the future, it is anticipated that WVA will be able to give reports on quantifying leakage and hopefully plugging any of the holes so that WVA can assure that every payer is paying equitably and that providers are doing exactly what they should be doing when they're assessing. Some of that is being done now, but it is not the same when it is being done manually versus having that ongoing data.

Ms. Zell also indicated that some of the projections will be changing and that is because of this additional information. Due to WVA's liquidity, it will still be burning down some of its reserves slowly, but because of the accuracy going forward, and a little more robust process as far as the assessment grid setting, there should be even more accurate projections in future years. Helms will be working closely with the DOH to pick the monthly purchases and over time can start to track purchases versus utilization.

DOH Updates

Ms. Allen briefly reported that DOH will be working with Ms. Zell and Helms to make sure that DOH is providing what they find helpful and then assess the process moving forward. DOH is also working on the individual provider profile update project. There was conversation about its provider punch list being updated next summer. However, to be proactive, they started on the project about a month ago and are hoping to have that wrapped up and have all provider profiles input by the end of the year. This is typically done every three years, but it has been done a little earlier this year because of the transition and making sure everything is accurate. Ms. Zell explained that a practice profile is the actual determination as far as what WVA is accountable for to the DOH for the purchase of vaccines. It is a very important number and WVA appreciates the DOH for putting in that work early when they are not required to by the CDC or the State.

Ms. Zell reported that notification letters regarding the transition will be going out. Going forward everything will be branded under WVA so there is no confusion to payers and providers to assist in effectuating a smooth transition. Ms. Zell reminded everyone to look for the News and Notices coming out and noted WVA will go through the normal assessment cycle pending whatever the CDC pediatric contract is April 1, 2020.

Other Matters from Committee Members

There were no other matters to come before the Committee.

Closing

There being no further business, the meeting was adjourned at approximately 1:16 p.m. PST.