

What: Board of Directors Meeting

When: November 4, 2021; 2:00-4:00 p.m. PST

Where: Zoom Meeting

<https://us02web.zoom.us/j/87831567917?pwd=SXgzSjA4NGxpZXA2UkFXUDFUDU0grQT09>

Dial by your location: 253 215 8782 US (Tacoma) or 646 558 8656 US (New York)

Meeting ID: 878 3156 7917 Passcode: 896277

Notice: The meeting may be recorded for the benefit of the minute-taker. The WVA intends to delete the recording after the minutes are approved.

Agenda for Board of Directors Meeting

Approx. Time	Pg.		Topic/ Anticipated Action	Presented by:
2:00-2:05 p.m.			1. Welcome & Introductions a. Notification of Recording	J. Zell
2:05-2:15 p.m.	3-6 7 7 7 7	* * * * *	2. Consent Calendar Items a. Board Meeting Minutes (June 17, 2021) b. Vote to Appoint Dr. Bartholomew as a Member c. Vote to Appoint Dr. Oliveira as a Board Member d. Vote to Reappoint Members e. Votes to Elect Officers / Committee Chairs	C. Murphy
2:15-2:25 p.m.	8-10 11-29	* *	3. Financial Update a. KPIs Update b. Compliance: Payer/Provider c. Finance Committee Update i. Vote to Ratify/Publish 2020-21 Audit & Report	P. Miller/J. Zell P. Auerbach
2:25-2:55 p.m.	30-31 32 33-34 35-36	* * * *	4. ED Updates a. Vote to Approve/Publish 2019-20 Annual Report b. 2022 Meeting Schedule c. Conflict of Interest and Code of Ethics Forms d. 2021 Goals Review e. Vote to Approve 2022 WVA Quarterly Goals	J. Zell/ P. Miller J. Zell
2:55-3:00 p.m.			5. Vaccine Committee Update	E. Marcuse
3:00-3:15 p.m.	37-57	*	6. Governance & HR Contractors a. Board Governance Survey Results b. HR Consultants i. Vote to Authorize HR consultant	C. Murphy/ J. Zell
3:15-3:25 p.m.			7. Department of Health Updates	M. Roberts
3:25-3:55 p.m.			8. Executive Session (Board Members and GC only) a. Cost Recovery/Indirect Charge i. Vote to Authorize MOU b. Board Members Discussion	A. Redman/ J. Zell / M. Roberts J. Zell
3:55-4:00 p.m.			9. Closing a. Next Meeting: February 3, 2022	C. Murphy

*Indicates an attachment to the agenda item.

Requires a vote.

**November 4, 2021 WVA Meeting of the Board of Directors
Proposed Form of Votes**

The following are suggested forms of votes only. They are intended to be an aid to facilitate work by individual directors. All Board policy and the final form of votes is exclusively the province of the Board acting collectively as the Board of Directors.

Items under Agenda Section 2:

- VOTED: To approve the minutes of the June 17, 2021 Board Meeting.
- [To approve the minutes of the June 17, 2021 Board Meeting with the changes suggested at the meeting.]
- VOTED: To confirm Dr. Bartholomew as a Board Member whose term expires in 2024 pursuant to RCW 70.290.030 (3)(a).
- VOTED: To confirm Dr. Oliveira as a Board Member whose term expires in 2024 pursuant to RCW 70.290.030 (3)(a).
- VOTED: To reappoint Dr. Marcuse as a WVA Board member pursuant to RCW 70.290.030 (3)(f) whose term expires in 2024.
- VOTED: To approve the 2021 WVA officer and committee chairs listed as presented to the Board at the meeting.
- [To approve the 2021 WVA officer and committee chairs listed as presented to the Board, with the changes suggested at the meeting.]
- VOTED: To approve the individuals listed to serve on the WVA's Finance, Operations, and Vaccine Committee as presented to the Board at the meeting.
- [To approve the individuals listed to serve on the WVA's Finance, Operations, and Vaccine Committee as presented to the Board with the changes suggested at the meeting.]

Items under Agenda Section 3:

- VOTED: To ratify the action of the Finance Committee in adopting and authorizing publication of the 2020-21 Financial Statements and independent auditor's report.
- [To ratify the action of the Finance Committee in adopting and authorizing publication of the 2020-21 Financial Statements and independent auditor's report with the changes suggested at the meeting.]

Items under Agenda Section 4:

VOTED: To approve the 2020-21 WVA Annual Report as presented to the Board.

[To approve the 2020-21 WVA Annual Report with the changes suggested at the meeting.]

VOTED: To approve the 2022 WVA Quarterly goals.

[To approve the 2022 WVA Quarterly goals with the changes suggested at the meeting.]

Items under Agenda Section 6:

VOTED: To authorize the retention of a Human Resources consultant with total costs not to exceed _____.]

Items under Agenda Section 8 [Executive Session]:

VOTED: To authorize the Executive Committee to finalize a Memorandum of Understanding with the Department of Health regarding the indirect and cost recovery charges.

[To authorize the Executive Committee to finalize a Memorandum of Understanding with the Department of Health regarding the indirect and cost recovery charges with the changes suggested at the meeting.]

**Washington Vaccine Association
Board of Directors Meeting
June 17, 2021; 2:00-4:00 p.m. (PST)**

I. Attendance. Due to COVID-19, this meeting was conducted solely by webinar. Participating in all or part of the meeting were the following individuals:

Directors

Chad Murphy, PharmD, Chair, Premera
Beth Harvey, MD, South Sound Pediatrics, Vice Chair
Patricia Auerbach, MD, MBA, FACP, Treasurer,
UnitedHealthcare
Ed Marcuse, MD, Emeritus Professor of
Pediatrics, University of Washington, Secretary
Helen Chea, MD, Molina Healthcare
John Dunn, MD, MPH, Kaiser Permanente
Cathy Falanga, Aetna Life Insurance Company
Jason A. Farber, Esq., Davis Wright Tremaine LLP
Steve Lam, PharmD, Regence BlueShield
Washington

WVA

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

Helms & Company, Inc.

Patrick Miller, MPH, WVA, Administrative Director
Lisa White, MS, JD, Customer and Financial Support
Specialist
Leslie Walker, CPA, Mason+Rich, PA
Alyssa McKeon, Project Support Leader

Others

Lydia Bartholomew, MD, Aetna
Sandy Biggers, Senior Regional Account Manager,
Public Health, West Coast, Seqirus
Rick Hourigan, MD, MHA, Market Medical
Executive, PNW (Seattle), Cigna
Janel Jorgenson, Washington Department of Health
Anne Redman, Esq., Perkins Coie, LLP

II. Summary of Actions Taken and/or Recommended

Actions Taken (votes adopted)

- i. To approve April 22, 2021, meeting minutes with the changes suggested at the meeting.
- ii. To approve the Plan of Operation as presented at the Board meeting.

III. Minutes

Welcome and Introductions

Mr. Murphy called the meeting to order at 2:03 p.m. Ms. Zell announced that the meeting would be recorded for the benefit of the minute taker, to be deleted once the minutes are approved. Mr. Miller took roll call. Mr. Murphy reviewed the agenda.

Consent Calendar

Dr. Harvey suggested edits to the minutes. Mr. Murphy asked for a motion to approve the minutes with the changes suggested at the meeting. Upon motion duly made and seconded, it was unanimously

VOTED: To approve April 22, 2021, meeting minutes with the changes suggested at the meeting.

Financial Update

Ms. Zell introduced the WVA financials for the eleven months-ended May 31, 2021. The WVA has seen a cash reduction as planned. Mr. Miller reviewed the WVA financials. In May, the WVA remitted more money to the state of Washington than it collected. Administrative expenses for the eleven months-ended May 31, 2021, are under budget. The year-end financials will be prepared in July. Preparation has begun for the annual audit that will conclude by September.

Department of Health Update

Ms. Jorgenson delivered the Department of Health (DOH) update. In the previous six months, the DOH has delivered 7.5 million doses of COVID-19 vaccine, which is equivalent to 2.5 years of vaccines given in the Childhood Vaccine Program (CVP).

Ms. Jorgenson reviewed two new vaccines that will be available for purchase beginning July 1, 2021: MenQuadfi and Vaxelis. The DOH will monitor uptake of MenQuadfi before determining if a scheduled end date for Menactra is needed.

There has been a rebound in catch-up immunization as seen in an uptick in doses ordered and doses administered. Immunization is not yet at pre-pandemic levels. The DOH will continue to promote back-to-school campaigns. The DOH is resuming the “Immunize Washington” campaign, which was suspended due to the COVID-19 pandemic. The Flu Fighters Facility Award program is active with facility recognition taking place in July. The DOH is beginning to plan for the next flu season by analyzing flu vaccine wastage rates.

Mr. Murphy asked if Ms. Jorgenson knew of any work to help payers receive easier access to immunization data. Ms. Jorgenson shared that the DOH has a matching process for the managed Medicare plans, but that they are looking to improve the process to make it less manual and more automated. Mr. Murphy asked that Ms. Jorgenson share feedback that payers desire help in targeting their communication through access to data.

Ms. Zell asked if Ms. Jorgenson will continue in her position. Ms. Jorgenson shared that she is scheduled to end this position in August, but it is looking more likely she will continue.

Executive Director Updates

Ms. Zell presented the proposed Interest and Late Assessments section changes to the Plan of Operations that had been made since the Board of Directors meeting in April 2021. The changes allow for payers to inform the WVA if the payer had not received the assessment in a timely fashion and provides for a longer, 180-day period before an assessment is considered late. Ms. Falanga requested a clarification as to when this would be applied. Ms. Zell clarified the interest rate would be applied on an ad hoc basis when a payer will not engage with the WVA to resolve the issue in a timely manner.

Mr. Murphy asked for a motion to approve the Plan of Operation as presented at the Board meeting. Upon motion duly made and seconded, it was unanimously

VOTED: To approve the Plan of Operation as presented at the Board meeting.

Ms. Zell stated that the Plan of Operation will be forwarded to the Secretary of Health for signature.

Ms. Zell presented a draft WVA mission statement and key messaging. The goal is to have clear and concise language that can be used externally to explain the purpose of the WVA. Dr. Auerbach inquired if the draft mission statement and the authorizing statute used the same language. Ms. Zell said the language was similar but expounded upon the language used in the WVA bylaws. Ms. Redman explained that the statute has explicit language on collecting funds while the proposed draft mission statement was more general. General discussion ensued. Mr. Farber and Dr. Auerbach suggested rethinking the use of the word “equitable” as it may be read to mean health equity for children. Ms. Falanga stated she would need others from her organization to weigh in on the draft mission statement. Ms. Zell clarified that as a private 501(c)(3) the mission statement would not need to be approved by the various organizations involved with the WVA. Ms. Falanga cautioned against the use of the word “all” in the draft mission statement as the WVA is not providing funding for all children. Mr. Murphy summarized, based on the feedback, that the mission statement should ideally match what the statute said. He suggested that the key messaging language was the place to use more general language. Ms. Zell will bring this back to the Board of Directors in November with further refinement.

Ms. Zell presented an update on two provider compliance issues the WVA has been working through. The first issue involved a provider group that was submitting all their DBAs with the WVA TIN. This issue was caught and corrected. The second issue involved a provider group who has been submitting zero-dollar DBAs since 2017. The WVA will likely need to go to each large payer to resolve the issue. Ms. Zell highlighted the work the WVA has begun in provider monitoring that will help avoid these types of issues in the future.

Ms. Zell presented an update on payer compliance efforts. The WVA has been receiving patient payments for assessments owed. The WVA has worked with several payers to refund patient payments; however, other payers have stated that it is not their responsibility to cover the vaccine costs for beneficiaries with limited preventative coverage

or co-insurance/co-pays. Ms. Redman stated that it is a complicated legal issue. She has drafted a memo that is being sent to payers stating that they are responsible for remitting DBAs to the WVA in full, irrespective of plan design. Ms. Zell requested that the Board discuss the matter. Ms. Redman added that the CDC will not allow for patient billing for the cost of the vaccines that they sell. Mr. Murphy agreed that there should be one set of rules applied to all payers. He asked for comments from the Board of Directors as to how the WVA should be approaching this. Mr. Lam asked if there was an opportunity to have the Operations Committee explore this issue. Ms. Zell shared that while the Operations Committee did get an update, she is seeking direction from the Board of Directors. Ms. Falanga shared that the Board could take a position but that this is a legal issue and should be worked out according to the statute and the laws. Mr. Lam concurred. Mr. Miller pointed out that patients get caught in the middle and that having a consistent policy would create a smoother experience for them. Ms. Zell suggested going to the state to have them weigh in. Ms. Redman shared that in initial conversations with the state, there was an alignment on how payers should be charged regardless of plan design. Mr. Murphy summarized that the Board now has awareness of the issue, and that Ms. Zell should leverage outside counsel to engage with the state.

Ms. Zell reviewed the WVA quarterly goals. The Board of Directors will be receiving a Board Governance Survey during which they can provide feedback. The WVA is moving forward with the Payer Certificate of Compliance Program. The flipbook for the new brochure has been finished and will be on the website soon.

IV. Executive Session. Confidential.

V. Closing.

With no further business before the Committee, Mr. Murphy closed the meeting at 4:11 pm PST.

**WVA Board of Directors, Board Terms,
Corporate Officers, and Committees
(Approved by the WVA Board November 4, 2021)**

The following individuals are voting members of WVA under RCW 70.290.010--090 (Wash. 2010) (the “Act”).
Their respective terms and committee assignments are set out below.

Name	Organization	Statutory Authority RCW 70.290.030	Year Term Ends	Officers	Executive Committee	Finance Committee	Operations Committee†	Vaccine Committee RCW 70.290.050
Murphy, Chad	Premiera BlueCross	Sec. (3)(a) Four Members	2023	Board Chair	C			X
Dunn, John	Kaiser Permanente	Sec. (3)(b) 1 Member	2022					X
Farber, Jason	Davis Wright Tremaine	Sec. (3)(c) 1 Member	2022			X		
Auerbach, Patricia	UnitedHealthcare	Sec. (3)(a) Four Members	2022	Board Treasurer	X	C		
Harvey, Beth	South Sound Pediatrics	Sec. (3)(f) 2 Members Secretary Appointment	2022	Board Vice President	X			
Randy Parker	Northwest Association of Administrators	Sec. (3)(d) 1 Member Secretary Appointment	2022			X		
Marcuse, Ed	University of Washington	Sec. (3)(f) 2 Members Secretary Appointment	2024	Board Secretary	X			C
Roberts, Michele	Department of Health	Sec. (3)(g) Secretary Designee	•					X
Oliveira, Andrew	Regence BlueShield	Sec. (3)(a) Four Members	2024					
Bartholomew, Lydia	Aetna	Sec. (3)(a) Four Members	2024					
Chea, Helen	Molina	Sec. (3)(c) 1 Member	2023					

Legend:

(“C”)=Chairperson

(“X”)=Member

(“•”)=Serves until a successor is appointed by the Secretary

(“†”)=Chaired by Executive Director



Ensuring Funds for Childhood Vaccines

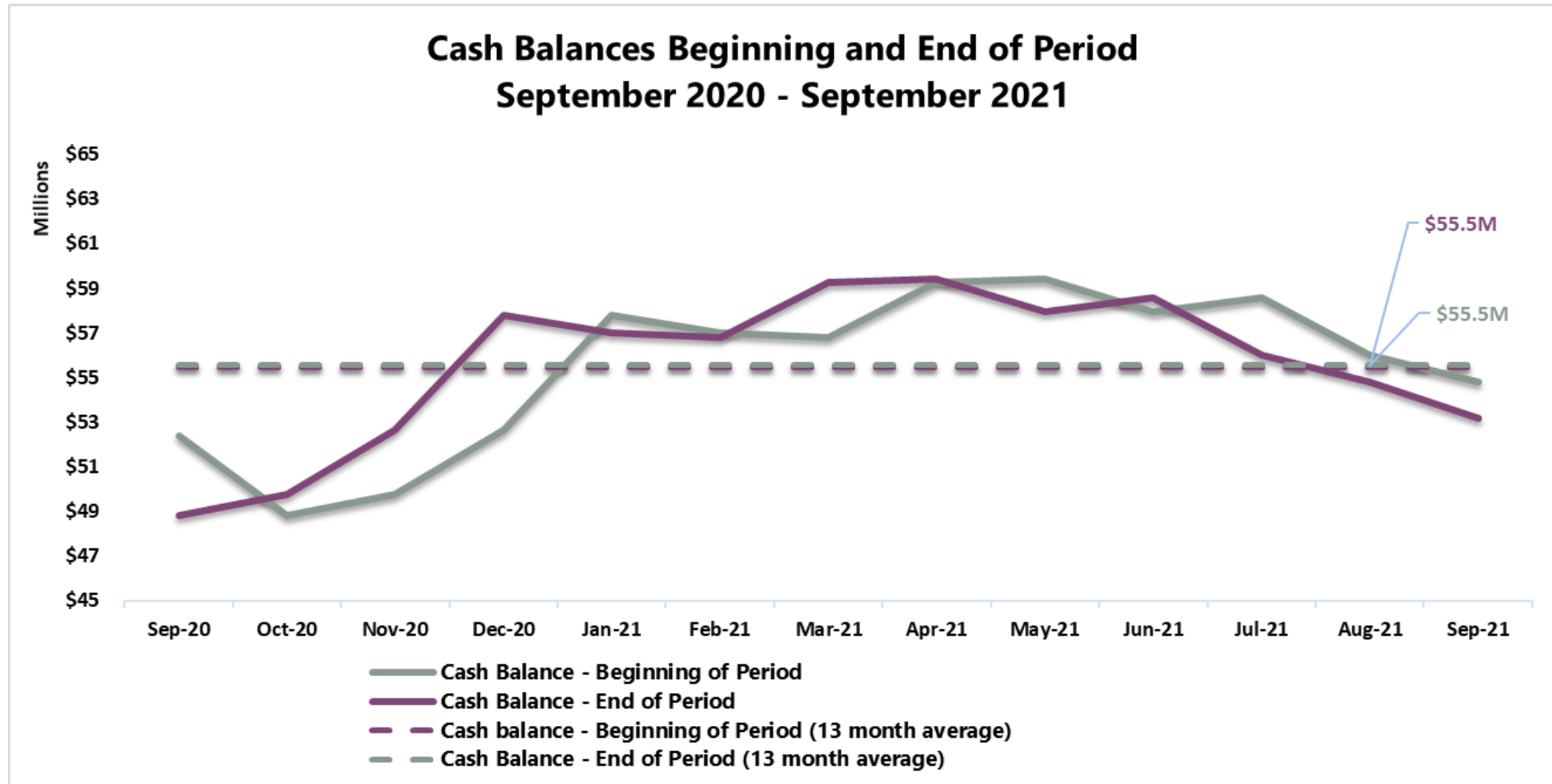
Finance Key Performance Indicators

Updated October 20, 2021

Confidential and Proprietary (C) 2021

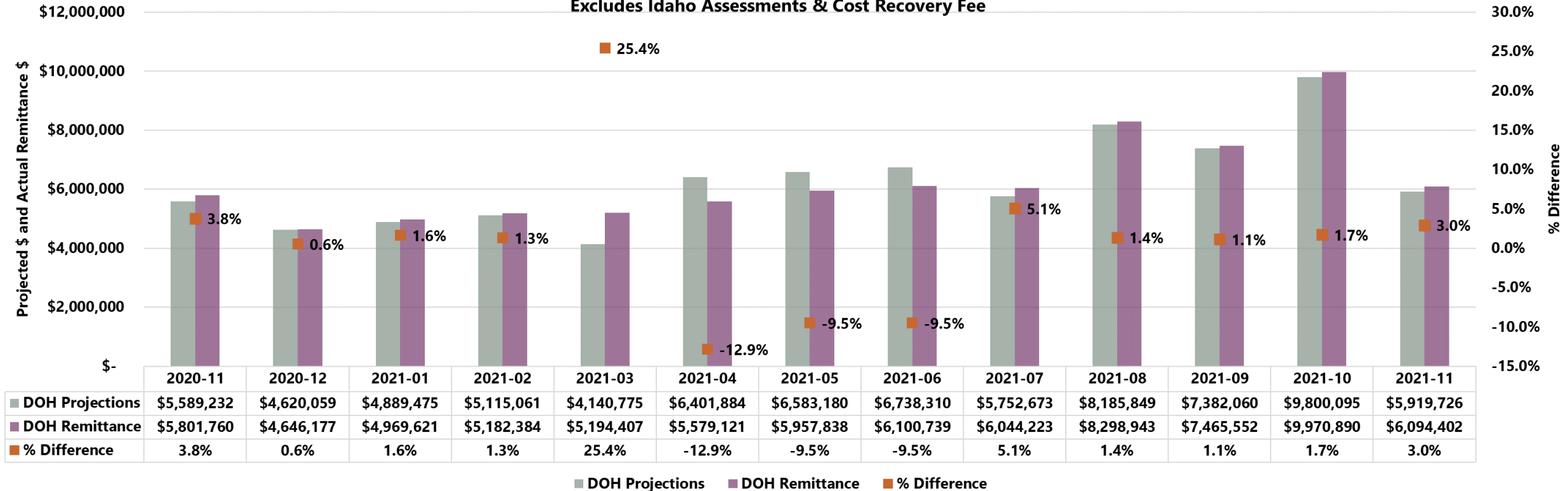


Beginning and Ending Cash Balances 13 Month Period



DOH Projections vs. Actual Remittances

Comparison of April/November DOH Projections with Actual DOH Remittances and the % Difference
Rolling 13 Months: November 2020 to November 2021 Funding as of 2021.10.18
Excludes Idaho Assessments & Cost Recovery Fee





Board of Directors
Washington Vaccine Association
Seattle, Washington

We have audited the financial statements of Washington Vaccine Association (the Association) as of and for the year ended June 30, 2021, and have issued our report thereon dated REPORT DATE. We have previously communicated to you information about our responsibilities under auditing standards generally accepted in the United States of America, as well as certain information related to the planned scope and timing of our audit. Professional standards also require that we communicate to you the following information related to our audit.

Significant audit findings

Qualitative aspects of accounting practices

Accounting policies

Management is responsible for the selection and use of appropriate accounting policies. The significant accounting policies used by Washington Vaccine Association are described in Note 2 to the financial statements.

No new accounting policies were adopted during fiscal year 2021. However, a change was made with regard to reporting the vaccine expense. In prior years, the full amount paid to the DOH was recorded as an expense each month based on amounts funded by DOH. Starting on January 1, 2020, the expense that is recorded each month is the expense associated with the DBA received. This creates a better match between the revenue recorded and the associated expense. The Association changed its policy for recording denials and price variances. Starting on January 1, 2020 actual denials and price variances based upon the posting of actual transaction data are recorded rather than an estimated 3% denial rate.

We noted no transactions entered into by the Association during the year for which there is a lack of authoritative guidance or consensus. All significant transactions have been recognized in the financial statements in the proper period.

Accounting estimates

Accounting estimates are an integral part of the financial statements prepared by management and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ significantly from those expected. The most sensitive estimate affecting the financial statements was:

- The allowance for vaccine waste is based on management's estimate that 2% of vaccines will not be utilized by providers. The percentage is based on historical discussions with the state of Washington Department of Health. We evaluated the key factors and assumptions used in determining that it is reasonable in relation to the financial statements taken as a whole.

Financial statement disclosures

Certain financial statement disclosures are particularly sensitive because of their significance to financial statement users. There were no particularly sensitive financial statement disclosures.

The financial statement disclosures are neutral, consistent, and clear.

Difficulties encountered in performing the audit

We encountered no significant difficulties in dealing with management in performing and completing our audit.

Uncorrected misstatements

Professional standards require us to accumulate all misstatements identified during the audit, other than those that are clearly trivial, and communicate them to the appropriate level of management. Management did not identify and we did not notify them of any uncorrected financial statement misstatements.

Corrected misstatements

Management did not identify and we did not notify them of any financial statement misstatements detected as a result of audit procedures.

Disagreements with management

For purposes of this letter, a disagreement with management is a financial accounting, reporting, or auditing matter, whether or not resolved to our satisfaction, that could be significant to the financial statements or the auditors' report. No such disagreements arose during our audit.

Management representations

We have requested certain representations from management that are included in the management representation letter dated REPORT DATE.

Management consultations with other independent accountants

In some cases, management may decide to consult with other accountants about auditing and accounting matters, similar to obtaining a "second opinion" on certain situations. If a consultation involves application of an accounting principle to the entity's financial statements or a determination of the type of auditors' opinion that may be expressed on those statements, our professional standards require the consulting accountant to check with us to determine that the consultant has all the relevant facts. To our knowledge, there were no such consultations with other accountants.

Significant issues discussed with management prior to engagement

We generally discuss a variety of matters, including the application of accounting principles and auditing standards, with management each year prior to engagement as the entity's auditors. However, these discussions occurred in the normal course of our professional relationship and our responses were not a condition to our engagement.

This communication is intended solely for the information and use of the board of directors and management of Washington Vaccine Association and is not intended to be, and should not be, used by anyone other than these specified parties.

CliftonLarsonAllen LLP

Bellevue, Washington
REPORT DATE

Draft for Discussion Purposes

WASHINGTON VACCINE ASSOCIATION
FINANCIAL STATEMENTS
YEARS ENDED JUNE 30, 2021 AND 2020

Draft for Discussion Purposes

**WASHINGTON VACCINE ASSOCIATION
TABLE OF CONTENTS
YEAR ENDED JUNE 30, 2021
(WITH COMPARATIVE TOTALS FOR JUNE 30, 2020)**

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Draft for Discussion Purposes



INDEPENDENT AUDITORS' REPORT

Board of Directors
Washington Vaccine Association
Seattle, Washington

We have audited the accompanying financial statements of Washington Vaccine Association (a nonprofit organization), which comprise the statements of financial position as of June 30, 2021 and 2020, and the related statements of activities and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes 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.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements 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 entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Board of Directors
Washington Vaccine Association

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Washington Vaccine Association as of June 30, 2021 and 2020, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

CliftonLarsonAllen LLP

Bellevue, Washington
REPORT DATE

Draft for Discussion Purposes

**WASHINGTON VACCINE ASSOCIATION
STATEMENTS OF FINANCIAL POSITION
JUNE 30, 2021 AND 2020**

	<u>2021</u>	<u>2020</u>
ASSETS		
CURRENT ASSETS		
Cash and Cash Equivalents	\$ 3,797,938	\$ 4,693,692
Estimated Collectible Assessments	5,011,329	12,555,955
Prepaid Vaccines to Washington Department of Health	<u>6,049,825</u>	<u>5,101,761</u>
Total Current Assets	14,859,092	22,351,408
INVESTMENTS	<u>54,767,977</u>	<u>52,193,456</u>
Total Assets	<u><u>\$ 69,627,069</u></u>	<u><u>\$ 74,544,864</u></u>
LIABILITIES AND NET ASSETS WITHOUT RESTRICTIONS		
CURRENT LIABILITIES		
Accounts Payable	\$ 171,233	\$ 326,045
ASSESSMENTS COLLECTED IN EXCESS OF VACCINE FUNDING AND ADMINISTRATIVE ACTIVITIES	<u>69,455,836</u>	<u>74,218,819</u>
Total Liabilities	69,627,069	74,544,864
NET ASSETS WITHOUT RESTRICTIONS	<u>-</u>	<u>-</u>
Total Liabilities and Net Assets Without Restrictions	<u><u>\$ 69,627,069</u></u>	<u><u>\$ 74,544,864</u></u>

Draft for Discussion Purposes

See accompanying Notes to Financial Statements.

**WASHINGTON VACCINE ASSOCIATION
STATEMENT OF ACTIVITIES
YEAR ENDED JUNE 30, 2021**

	Administrative Activities	Vaccine Funding Activities	Total
CHANGE IN NET ASSETS WITHOUT RESTRICTION			
Assessment Activity:			
Assessments	\$ (2,092,497)	\$ 81,366,326	\$ 79,273,829
Refunds	(370,160)	-	(370,160)
Waste	(1,338,320)	-	(1,338,320)
Denials and Price Variances	(285,713)	-	(285,713)
Cost Recovery Charge	(1,049,104)	-	(1,049,104)
Vaccine Replenishments	-	(79,487,962)	(79,487,962)
Net Assessment Activity	(5,135,794)	1,878,364	(3,257,430)
Investment Income:			
Interest and Dividends	1,152,683	-	1,152,683
Realized Gain on Investments	177,456	-	177,456
Unrealized Depreciation of Fair Value	(1,144,871)	-	(1,144,871)
Total Investment Income	185,268	-	185,268
Less: Investment Expenses	(130,053)	-	(130,053)
Net Investment Income	55,215	-	55,215
Expenses:			
Administrative:			
Third-Party Administrative Services	989,049	-	989,049
Executive Director Costs and Related Support	240,767	-	240,767
Provider and Payer Education and Outreach	52,044	-	52,044
Administrative Costs	183,292	-	183,292
Other Discretionary Expenditures	95,616	-	95,616
Total Expenses	1,560,768	-	1,560,768
Total Change in Net Assets Without Restrictions	(6,641,347)	1,878,364	(4,762,983)
VACCINE FUNDING AND ADMINISTRATIVE ACTIVITIES IN EXCESS OF ASSESSMENTS COLLECTED	6,641,347	(1,878,364)	4,762,983
CHANGE IN NET ASSETS WITHOUT RESTRICTIONS	-	-	-
Net Assets Without Restrictions - Beginning of Year	-	-	-
NET ASSETS WITHOUT RESTRICTIONS - END OF YEAR	\$ -	\$ -	\$ -

See accompanying Notes to Financial Statements.

**WASHINGTON VACCINE ASSOCIATION
STATEMENT OF ACTIVITIES
YEAR ENDED JUNE 30, 2021**

	Administrative Activities	Vaccine Funding Activities	Total
CHANGE IN NET ASSETS WITHOUT RESTRICTIONS			
Assessment Activity:			
Assessments	\$ 7,614,400	\$ 73,423,339	\$ 81,037,739
Refunds	(624,992)	-	(624,992)
Waste	(1,490,121)	-	(1,490,121)
Denials and Price Variances	(4,801,762)	-	(4,801,762)
Cost Recovery Charge	(462,339)	-	(462,339)
Vaccine Replenishments	-	(61,491,993)	(61,491,993)
Net Assessment Activity	235,186	11,931,346	12,166,532
Investment Income:			
Interest and Dividends	1,463,891	-	1,463,891
Realized Gain on Investments	41,528	-	41,528
Unrealized Appreciation of Fair Value	341,049	-	341,049
Total Investment Income	1,846,468	-	1,846,468
Less: Investment Expenses	(130,282)	-	(130,282)
Net Investment Income	1,716,186	-	1,716,186
Expenses:			
Administrative:			
Third-Party Administrative Services	1,289,939	-	1,289,939
Executive Director Costs and Related Support	311,979	-	311,979
Provider and Payer Education and Outreach	63,234	-	63,234
Administrative Costs	208,506	-	208,506
Other Discretionary Expenditures	53,730	-	53,730
Total Expenses	1,927,388	-	1,927,388
Total Change in Net Assets Without Restrictions	23,984	11,931,346	11,955,330
VACCINE FUNDING AND ADMINISTRATIVE ACTIVITIES IN EXCESS OF ASSESSMENTS COLLECTED	(23,984)	(11,931,346)	(11,955,330)
CHANGES IN NET ASSETS WITHOUT RESTRICTIONS	-	-	-
Net Assets Without Restrictions - Beginning of Year	-	-	-
NET ASSETS WITHOUT RESTRICTIONS - END OF YEAR	\$ -	\$ -	\$ -

See accompanying Notes to Financial Statements.

**WASHINGTON VACCINE ASSOCIATION
STATEMENTS OF FUNCTIONAL EXPENSES
YEARS ENDED JUNE 30, 2021 AND 2020**

	Program Services	2021 Management and General	Total
Vaccine Replenishments	\$ 80,537,066	\$ -	\$ 80,537,066
Payroll	-	240,767	240,767
Third-Party Administrative Services	-	989,049	989,049
Special Projects Services	-	52,044	52,044
Legal and Accounting	-	183,292	183,292
Office	-	95,616	95,616
Total	80,537,066	1,560,768	82,097,834
Less Expenses Netted Against Revenues on the Statement of Activities:			
Vaccine Replenishments	(80,537,066)	-	(80,537,066)
Total Expenses Included in the Expense Section of the Statement of Activities	<u>\$ -</u>	<u>\$ 1,560,768</u>	<u>\$ 1,560,768</u>
	Program Services	2020 Management and General	Total
Vaccine Replenishments	\$ 61,954,332	\$ -	\$ 61,954,332
Payroll	-	311,979	311,979
Third-Party Administrative Services	-	1,289,939	1,289,939
Special Projects Services	-	63,234	63,234
Legal and Accounting	-	208,506	208,506
Office	-	53,730	53,730
Total	61,954,332	1,927,388	63,881,720
Less Expenses Netted Against Revenues on the Statement of Activities:			
Vaccine Replenishments	(61,954,332)	-	(61,954,332)
Total Expenses Included in the Expense Section of the Statement of Activities	<u>\$ -</u>	<u>\$ 1,927,388</u>	<u>\$ 1,927,388</u>

See accompanying Notes to Financial Statements.

**WASHINGTON VACCINE ASSOCIATION
STATEMENTS OF CASH FLOWS
YEARS ENDED JUNE 30, 2021 AND 2020**

	<u>2021</u>	<u>2020</u>
CASH FLOWS FROM OPERATING ACTIVITIES		
Assessments Collected	\$ 83,775,158	\$ 66,448,551
Cash Remittances to Washington Department of Health for Vaccines	(80,436,026)	(60,131,509)
Administrative Expenses Paid	(1,715,580)	(1,624,051)
Cash Received from Interest and Dividend Income	1,152,683	1,463,891
Cash Paid for Investment Expenses	(130,053)	(130,282)
Net Cash Provided by Operating Activities	<u>2,646,182</u>	<u>6,026,600</u>
CASH FLOWS FROM INVESTING ACTIVITIES		
Investment Purchases	(88,207,924)	(70,938,632)
Proceeds from Investment Sales	84,665,988	64,683,729
Net Cash Used by Investing Activities	<u>(3,541,936)</u>	<u>(6,254,903)</u>
NET DECREASE IN CASH AND CASH EQUIVALENTS	(895,754)	(228,303)
Cash and Cash Equivalents - Beginning of Year	<u>4,693,692</u>	<u>4,921,995</u>
CASH AND CASH EQUIVALENTS - END OF YEAR	<u><u>\$ 3,797,938</u></u>	<u><u>\$ 4,693,692</u></u>
RECONCILIATION OF CHANGE IN NET ASSETS TO NET CASH PROVIDED BY OPERATING ACTIVITIES		
Change in Net Assets	\$ -	\$ -
Adjustments to Reconcile Change in Net Assets to Net Cash Provided by Operating Activities:		
Realized Gain on Investments	(177,456)	(41,528)
Unrealized Depreciation (Appreciation) of Fair Value	1,144,871	(341,049)
(Increase) Decrease in:		
Estimated Collectible Assessments	7,544,626	(7,209,974)
Prepaid Vaccines to Washington Department of Health	(948,064)	1,360,484
Increase (Decrease) in:		
Accounts Payable	(154,812)	303,337
Assessments Collected in Excess of Vaccine Funding and Administrative Activities	(4,762,983)	11,955,330
Net Cash Provided by Operating Activities	<u><u>\$ 2,646,182</u></u>	<u><u>\$ 6,026,600</u></u>

See accompanying Notes to Financial Statements.

**WASHINGTON VACCINE ASSOCIATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2021 AND 2020**

NOTE 1 NATURE OF ORGANIZATION

Organization and Operations

Since 1990, Washington State has maintained a Universal Childhood Vaccine Program, providing vaccines to all children under age 19. Together with state and federal funding, Washington's program has advanced the widely recognized benefits of universal childhood vaccination. Faced with a scheduled end to state funding in 2010, the Washington State legislature established the Washington Vaccine Association (the Association) and mandated the creation of a universal vaccine purchase account to be able to continue providing state-supplied vaccines to privately-insured children. This legislation was adopted after a year of study by and with broad support from the Washington healthcare community.

The Association is a special purpose nonprofit corporation formed on April 1, 2010, to support the state government in developing and administering a new method for collecting funds to support the Universal Childhood Vaccine Program. The Washington legislature created the Association through the Washington Vaccine Association Act, now codified in RCW 70.290.010 – .900.

The Association's members are comprised of all health insurance carriers issuing or renewing health benefit plans in Washington State, and all third-party administrators (TPAs) conducting business on behalf of residents of Washington State or Washington health care plans.

The Association's primary purpose is to collect funds through mandatory assessments paid by its members. Fund transfers are made to the state of Washington Department of Health (DOH) on a just-in-time basis for the on-going pre-purchase of vaccines. The vaccines are to be administered to children in the state of Washington who are under the age of 19 and who are not eligible for federal or state funded vaccines through existing programs.

The Association is operated under a Plan of Operation adopted by the board of directors as required by RCW 70.920.030 (5)(b). The Association's governance documents are available at the Association's website: www.wavaccine.org.

Termination of the Association

The Association's board may vote to recommend termination of the Association if it finds that the original intent of its formation and operation has not been achieved. The Association's board must provide notice of the recommendation to the relevant policy and fiscal committees of the Washington State legislature within 30 days of the vote being taken by the Association's board. If the legislature has not acted by the last day of legislative session to reject the board's recommendation, the board may vote to permanently dissolve the Association.

In the event of a voluntary or involuntary dissolution of the Association, funds remaining in the Universal Purchase Vaccine Account (UVPA) created in RCW 43.70.720 must be returned to members in proportion to their previous year's contribution, from any balance remaining.

**WASHINGTON VACCINE ASSOCIATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2021 AND 2020**

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Association have been prepared in accordance with the provisions of accounting standards generally accepted in the United States of America. Under those standards, net assets and revenues, expenses, gains, and losses are classified based on the existence or absence of donor-imposed restrictions. The Association's net assets do not contain restrictions as of June 30, 2021.

Concentration of Risk

Financial instruments that subject the Association to concentrations of credit risk consist of cash deposits. The Association places its cash deposits with high quality financial institutions. Deposits exceed federally insured limits as of June 30, 2021.

Estimates and Assumptions

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and 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.

Cash and Cash Equivalents

For the purposes of the statements of cash flows, all highly liquid investments available for use with an initial maturity of three months or less are considered to be cash equivalents.

Investments

Investments in marketable equity securities, U.S. Treasury securities, U.S. federal agencies, corporate bonds, and certificates of deposit with original maturities greater than 90 days are reported at fair value. Realized and unrealized gains and losses are reflected in the statement of activities as changes in net assets without restrictions unless their use is restricted by a donor or by law.

Estimated Collectible Assessments

Estimated collectible assessments represents the running total of replenishment requests to date minus amounts collected to date through the end of the year, and is the amount the Association expects to collect from members. The Association has determined that an allowance for uncollectible amounts is not necessary due to the method used to calculate the balance.

The Association charges interest on late payment of assessments at a monthly rate of 1.5%. Interest is added to the assessment for payments received after the due date of the assessment.

**WASHINGTON VACCINE ASSOCIATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2021 AND 2020**

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Dosage Based Assessments

Funds collected from health insurers and TPAs of health plans in the state of Washington, (including administrative revenue and reserve portion discussed below), are determined using a Dosage Based Assessment methodology. At each vaccine administration of a child in the state of Washington, not otherwise eligible for state or federally-funded vaccine programs, the provider's office charges for and generates a claim for administrative services and also generates an item, resembling a claim form, on which the per-vaccine assessment is reported to the respective payor. The per-vaccine assessment amounts are established periodically by the Association. The payor pays the provider for the administration claim, and also pays the assessment amount to the Association, in a manner similar to payment of a claim for the cost of vaccines. The Association collects these assessments and remits payments to the state of Washington DOH to pay its allocated share of vaccine costs each time a vaccine replenishment order for the State's Universal Childhood Vaccine Program is due. The cost for each vaccine is negotiated by the Center for Communicable Diseases.

Remittance to Universal Purchase Account

The Plan of Operation requires the Association to periodically remit its assessment receipts, less the Association's administrative costs and any reserves set by the board or its finance committee, to the credit of the universal vaccine purchase account (UVPA) established pursuant to RCW 43.70.720. Funds transferred to the UVPA are to be delivered on a just-in-time basis, in order to support the assessment collection process. The DOH or its designee has access privileges to be able to directly observe the balances in the Association's accounts, and the Association is required to promptly respond to any inquiry of the DOH concerning the availability and timely transfer of funds, enabling the DOH to make payment of the Association's share under the statute for vaccine purchases made by the state of Washington.

Revenue Recognition

Revenue from Exchange Transactions: The Association recognizes revenue in accordance with FASB ASU 2014-09, *Revenue from Contracts with Customers*, as amended. ASU 2014-09 applies to exchange transactions with customers that are bound by contracts or similar arrangements and establishes a performance obligation approach to revenue recognition. The Association records the following exchange transaction revenue in its statement of activities for the year ending June 30, 2021 and 2020:

The Association collects member assessments that are remitted to the DOH for purchase of vaccines. In addition, the Plan of Operation allows the Association to retain sufficient funds to cover its administrative costs, net of investment income. Expense is recognized for the administrative costs of operating the Association. The replenishment of vaccines and collection of vaccine assessments are similar to agency transactions. Although these transactions are not considered revenue or expenses of the Association, they are included in the statement of activities as vaccine replenishments to reflect the gross amount of collections and replenishments.

**WASHINGTON VACCINE ASSOCIATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2021 AND 2020**

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Assessments Collected in Excess of Vaccine Funding and Administrative Costs

The Association has collected assessments in excess of amounts required to be paid to the DOH through the end of the accounting period for childhood vaccine funding and administrative costs. The Association is a limited purpose entity whose funds are dedicated solely to the specific purposes discussed above. These excess assessment collections, which may accumulate from time to time, will be applied to (i) future vaccine funding obligations of the Association, and (ii) reasonable and necessary operating costs of the Association. The Association maintains a level of excess collections (reserves) to be able to meet DOH needs for vaccine purchases and ensure adequate funds for operations. As of June 30, 2021 and 2020, assessments collected in excess of vaccine funding and administrative activities totaled \$69,455,836 and \$74,218,819 respectively.

Income Taxes

The Association follows FASB ASC *Topic 740, Income Taxes (Topic 740)*. Topic 740 clarifies the accounting for uncertainty in income taxes.

The Association operates as a tax-exempt organization created by Washington State statute and as an affiliate of a governmental unit. In order to obtain 501(c)(3) status and to determine whether filing of an annual federal information return (Form 990) is required, the Association prepared and submitted Form 1023 to the Internal Revenue Service (IRS) in June 2012. On May 14, 2013, the IRS granted 501(c)(3) tax-exempt status and determined that the filing of Form 990 is not required in prior or future years.

Management evaluated the Association's tax positions and concluded that the Association had taken no uncertain tax positions that require adjustments to the financial statements. Based upon its evaluation, the Association has concluded that it is operating in compliance within its tax-exempt status and that there are no matters that would create taxable income.

Functional Allocation of Expenses

The costs of providing the various programs and other activities have been summarized on a functional basis in the statements of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited. Vaccine replenishments are considered to be program expenses and all other expenses are administrative.

Subsequent Events

The board of directors and management have evaluated subsequent events through REPORT DATE, the date the financial statements were available to be issued.

**WASHINGTON VACCINE ASSOCIATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2021 AND 2020**

NOTE 3 INVESTMENTS AND FAIR VALUE MEASUREMENTS

FASB established a framework for measuring fair value and disclosing fair value measurements to financial statement users. Fair value is the price that would be received to sell an asset or paid to transfer a liability (referred to as the exit price) in an orderly transaction between market participants in the principal market, or if none exists, the most advantageous market, for specific assets or liabilities at the measurement dates. The fair value should be based on assumptions that market participants would use, including consideration of nonperformance risk.

In determining fair value, the Association uses various valuation approaches. FASB established a hierarchy for inputs used in measuring fair value that maximizes the use of observable inputs and minimizes the use of unobservable inputs by requiring that the most observable inputs be used when available. Observable inputs are inputs that market participants would use in pricing the asset or liability developed based on market data obtained from sources independent of the Association. Unobservable inputs are inputs that reflect the Association's assumptions that market participants would use in pricing the assets or liabilities developed based on the best information available in the circumstances.

The hierarchy is broken down into three levels based on the observability of inputs as follows:

Level 1 – Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets to which the Association has access.

Level 2 – Inputs to the valuation methodology include quoted prices for similar assets and liabilities in active markets; quoted prices for identical or similar assets and liabilities in inactive markets; inputs other than quoted market prices that are observable for the asset or liability; and inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The availability of observable inputs can vary and is affected by a wide variety of factors, including, for example, the type of asset or liability, the liquidity of markets, and other characteristics particular to the transaction. To the extent that valuation is based on models or inputs that are less observable or unobservable in the market, the determination of fair value requires more judgment. Accordingly, the degree of judgment exercised by the Association in determining fair value is greatest for instruments categorized in Level 3.

In certain cases, the inputs used to measure fair value may fall into different levels of the fair value hierarchy. In such cases, for disclosure purposes, the level in the fair value hierarchy within which the fair value measurement falls in its entirety is determined based on the lowest level input that is significant to the fair value measurement in its entirety.

**WASHINGTON VACCINE ASSOCIATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2021 AND 2020**

NOTE 3 INVESTMENTS AND FAIR VALUE MEASUREMENTS (CONTINUED)

Fair value is a market-based measure considered from the perspective of a market participant rather than an organization-specific measure. Therefore, even when market assumptions are not readily available, the Association's own assumptions are set to reflect those that the Association believes market participants would use in pricing the asset or liability at the measurement date.

The following table sets forth by level, within the fair value hierarchy, the Association's assets at fair value as of June 30, 2021:

	Level 1	Level 2	Level 3	Total
Money Market Funds	\$ 2,963,274	\$ -	\$ -	\$ 2,963,274
Mutual Funds	5,070,725	-	-	5,070,725
Corporate Bonds	-	22,082,738	-	22,082,738
U.S. Treasuries	-	1,824,105	-	1,824,105
U.S. Federal Agencies	-	10,170,142	-	10,170,142
Certificates of Deposit	-	12,656,993	-	12,656,993
Total Schedule of Investments	<u>\$ 8,033,999</u>	<u>\$ 46,733,978</u>	<u>\$ -</u>	<u>\$ 54,767,977</u>

The following table sets forth by level, within the fair value hierarchy, the Association's assets at fair value as of June 30, 2020:

	Level 1	Level 2	Level 3	Total
Money Market Funds	\$ 17	\$ -	\$ -	\$ 17
Mutual Funds	6,890,819	-	-	6,890,819
Corporate Bonds	-	23,910,989	-	23,910,989
U.S. Treasuries	-	1,044,020	-	1,044,020
U.S. Federal Agencies	-	7,313,045	-	7,313,045
Certificates of Deposit	-	13,034,566	-	13,034,566
Total Schedule of Investments	<u>\$ 6,890,836</u>	<u>\$ 45,302,620</u>	<u>\$ -</u>	<u>\$ 52,193,456</u>

NOTE 4 REMITTANCE TO THE STATE OF WASHINGTON

Pursuant to the Association's statutory purposes, a transfer of \$80,537,066 and \$61,954,332 was made by the Association to the state of Washington's UVPA during the year ended June 30, 2021 and 2020 respectively. The transfers include a cost recovery administrative charge assessed by the State of Washington DOH.

**WASHINGTON VACCINE ASSOCIATION
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2021 AND 2020**

NOTE 5 INFORMATION REGARDING LIQUIDITY AND AVAILABILITY

The Association is substantially supported by assessment income. As part of the Association's liquidity management, it has a policy to structure its financial assets to be available for its general expenditures, liabilities, and other obligations come due. Financial assets in excess of near-term cash requirements are invested in various marketable securities.

The Board of Directors of the Association (the Board) has determined that to carry out its statutory and charitable purpose, the Association should maintain minimum reserves in amounts projected by the Board to cover several months of vaccines costs plus the next flu season vaccines to provide liquidity to fund the costs of such vaccines through timely (just in time) deposits to the state's universal vaccine purchase account.

The following table reflects the Association's financial assets available within one year to meet cash needs for general expenditures as of June 30:

	2021	2020
Cash and Cash Equivalents	\$ 3,797,938	\$ 4,693,692
Estimated Collectible Assessments	5,011,329	12,555,955
Investments	<u>54,767,977</u>	<u>52,193,456</u>
Total Financial Assets Available to Meet Cash		
Needs for General Expenditures Within One Year	<u>\$ 63,577,244</u>	<u>\$ 69,443,103</u>

NOTE 6 CONTINGENCIES

There is an inherent risk that a certain portion of the vaccines purchased by the DOH will not be administered to children, resulting in vaccine shrinkage. If member assessments are insufficient for reimbursement to the DOH for purchases of vaccines, the Association would be liable to the DOH to cover the shortfall through reserves. The Association's reserves are intended to meet any such contingency.



Annual Report



Dear Friends and Colleagues,

As the Washington Vaccine Association (WVA) closes its eleventh year, we look forward to continuing our successful public-private partnership with the Washington State Department of Health (DOH). The WVA is instrumental in supporting the state's universal purchase of childhood vaccines, which directly benefits patients, providers, payers, and the public health. As we emerge from the COVID-19 pandemic, the WVA's role in providing a stable vaccine funding source is critical, and we are proud to support Washington State's efforts to ensure all children have equal access to vaccines.

In the past year, the Association refined its operations to increase processing capacity, which allows for improved assessment monitoring, cash flow analysis, and forecasting. These investments in the WVA's infrastructure have allowed us to identify potential errors in the assessment processes and be more proactive in correcting issues with provider and payer partners. Additionally, the WVA has used these lessons to develop a series of help guides and checklists for our stakeholders to prevent reoccurring problems. We are confident that these measures will improve our operations and we expect that our efforts will aid us in strengthening partnerships and ensuring equitable participation of payers and providers in our program. We are also pleased to note that the WVA has decreased the financial assessment rates for a 4th straight year, helping to lower overall healthcare costs.

Join me in thanking our generous board members, WVA staff and support administrators, and the WA State DOH teams who dedicate their time and resources to guide the Association's operational and strategic direction.

Chad Murphy, BS, PharmD
Board Chair

Eleven Years of Stable Vaccine Funding for Washington State Children

The Washington Vaccine Association (WVA) is excited once again to share the important benefits of our state's unique universal Childhood Vaccination Program (CVP).

- **Healthcare Savings.** The DOH's bulk purchases of all pediatric vaccines from the Centers for Disease Control and Prevention's (CDC) manufacturer contracts provides significant cost savings versus private market costs.
- **Stable Vaccine Supply.** Providers can focus on patient needs and have the full compliment of recommended vaccines on hand to immunize children.
- **Consolidated Storage and Ordering.** Provider staff can avoid both navigating complex ordering systems and keeping separate storage inventories for vaccines based on insurance status. This allows for a blended stock of vaccines and a streamlined ordering process, supported by the CVP.
- **No Provider Financing Costs.** Instead of fronting significant dollars to keep vaccines on hand, providers receive and administer pediatric vaccines procured by the DOH and use their existing billing system to trigger the WVA's collection of funds from health plans for privately-insured children.

HOW FUNDING WORKS



*There is no charge to patients. **According to the wavaccine.org/assessment-grid.



WVA BOARD OF DIRECTORS

Chad Murphy, BS, PharmD, Chair
Vice President, Pharmacy Contracting and
Consulting, Premera Blue Cross

Beth Harvey, MD, Vice Chair
Sound Pediatrics

Patricia Auerbach, MD, MBA, FACP, Treasurer
Chief Medical Officer, Pacific Northwest States,
Employer and Individual, UnitedHealthcare

Edgar Marcuse, MD, MPH, FPIDS, Secretary
Emeritus Professor of Pediatrics,
University of Washington

Helen Chea, MD
Pediatric Medical Director, Molina Healthcare

Steve Lam, PharmD
Clinical Pharmacist Client Manager,
Regence BlueShield Washington

Catherine Falanga
Director of Provider Relations,
Aetna Life Insurance Company

John B. Dunn, MD, MPH
Medical Director for Preventative Care,
Kaiser Permanente

Michele Roberts, MPH, MCHES
Acting Assistant Secretary, Prevention and
Community Health Department, Washington
State Department of Health

Jason A. Farber, Esq.
Partner, Davis Wright Tremaine LLP

Randy Parker
Administrator, Carpenters Trusts
of Western Washington

WVA STAFF

Julia G. Zell, MA, Esq.
Executive Director

HELMS & COMPANY, INC. STAFF
Patrick B. Miller, MPH
Administrative Director

P 888.928.2224 | F 888.928.2242
info@wavaccine.org | wavaccine.org

THANK YOU to the Washington State Department of Health: Responding Quickly to a Public Health Crisis

During this unprecedented year, the Washington State Department of Health (DOH), the WVA's public partner, undertook extraordinary efforts to respond quickly to the COVID-19 outbreak, mobilizing existing resources and augmenting staff where necessary to ensure the best public health outcomes and guaranteeing that the Childhood Vaccination Program was minimally impacted by the pandemic.

We are proud to highlight some of DOH's achievements during the COVID crisis:

- DOH on-boarded 40+, dedicated full-time staff members to a newly created COVID Vaccine Program to address the public health crisis; this number does not include many additional staff assigned to the COVID vaccine response from other programs and divisions within the Department.



1,730+

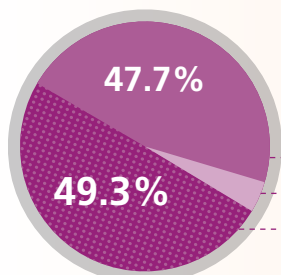
**Number of providers the state mobilized
to administer COVID vaccines in 2020-21***

*Includes more than 700 of our Childhood Vaccine Program providers

- Provider enrollment in the Childhood Vaccine Program remained relatively stable with 1,013 provider clinics enrolled at the end of June 2020 compared to 1,004 enrolled at the end of June 2021. The majority (70%) of facilities who dis-enroll from the program were due to a change in practice status, such as the practice closed, physician retired, merged with another practice, or changed ownership.
- Over 600 provider site visits were completed from July 2020 – June 2021.

FINANCIALS

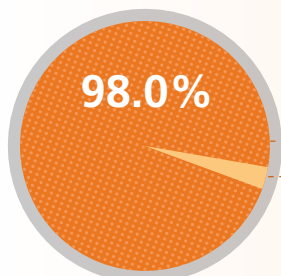
July 1, 2020 - June 30, 2021



Childhood Vaccine Funding Sources

Estimated Total: \$154,407,270

WVA Vaccine Assessments
3.2% | State Childhood Healthcare Insurance Programs
Federal Vaccine for Children Funds



WVA Program Expenditures

Total: \$73,292,682

Remittance to WA for Vaccine Costs*
2.1% | Operating Costs

*This chart reflects funding for WVA-funded vaccines on a cash basis. The audited financials are available at www.wavaccine.org.





**2022 WVA Corporate Governance
Calendar**
(Board Meeting and Committee Meeting
Schedules)

Month	Board Meeting 2-4 PM	Executive Committee 2:30-3:30 PM	Finance Committee 3-4 PM	Vaccine Committee 12:00-1:00 PM	Operations Committee 12:30-1:30 PM
January		January 20			
February	February 3		February 17		
March		March 24			
April	April 14		April 7 ¹	April 21	April 28 Grid Approval
May					
June	June 16	June 9			
July					
August		August 18			
September			September 22		
October		October 13			October 27
November	November 3 Annual Meeting			November 3	
December					

***All times are Pacific Standard Time**

- A written annual report may serve in lieu of an annual meeting of members. (Bylaws section 4.2)
- Officers are elected for 1-year terms at the annual meeting of the Board (Bylaws section 6.1)
- Committees may adjust their scheduled meeting dates or times for the convenience of their members

To be Finalized by the Board on 2021-11-04 / Revised 2021-08-23

¹ A budget-specific planning call with the Finance Chair, Executive Director, and Administrator will be held in advance of this meeting.

WORKSTREAM	Q1 CY2021	Q2 CY2021	Q3 CY2021	Q4 CY2021
GOVERNANCE	<ul style="list-style-type: none"> ✓ Plan of Operation Changes Approved ✓ Public Comment Procedure Approved ✓ DOH Common Interest Agreement Signed 	<ul style="list-style-type: none"> ✓ Board Governance Survey ✓ Redesign Board Member Handbook (Publish in November with Charter Approvals) 	<ul style="list-style-type: none"> • Review and Update Board Policies • Review and Update Board Committee Charters • Review and Update BAAs w/ Contractors 	<ul style="list-style-type: none"> • Election of Officers and Committee Chairs • Set CY2022 Meeting Schedule • Publish Annual Report • Set CY2022 Annual Goals
AUTOMATION AND DATA BUILD	<ul style="list-style-type: none"> ✓ Maintain ERA and ACH Volumes = 95% of Receipts [Actual 93% ERA and 94% ACH] ✓ Payer DB Modifications to Include Compliance Contacts 	<ul style="list-style-type: none"> ✓ Maintain ERA and ACH Volumes = 95% of Receipts [Actual to date 94% ERA and 92% ACH] ✓ Design the TPA Database Updates to Support Plan of Operation Changes & All Payer Registration Functionality 	<ul style="list-style-type: none"> ✓ Maintain ERA and ACH Volumes = 95% of Receipts [Actual to date 93% ERA and 94% ACH] ✓ Payer Database IT Development Phase 1 	<ul style="list-style-type: none"> • Maintain ERA and ACH Volumes = 95% of Receipts • Payer Database IT Development Phase 2
ANALYTICS AND COMPLIANCE	<ul style="list-style-type: none"> ✓ Top Tier Payer Compliance Reviews ✓ Enhanced Financial KPI Reporting ✓ Re-Design Payer Settlement Report Process ✓ Continue Ad Hoc Provider DBA Reviews 	<ul style="list-style-type: none"> ✓ Top Tier Payer Compliance Reviews ✓ Enhanced Financial KPI Reporting (Cont.) ✓ Begin Design of Payer Certificate of Compliance Program/Fact Sheet ✓ Approve and Launch Re-Designed Payer Settlement Reporting Process ✓ Continue Ad Hoc Provider DBA Reviews 	<ul style="list-style-type: none"> ✓ Top Tier Payer Compliance Reviews • Approve Payer Certificate of Compliance Program ✓ Continue Ad Hoc Provider DBA Reviews 	<ul style="list-style-type: none"> • Roll Out Payer Certificate of Compliance Program • Complete Top 8 Payer Compliance Reviews
COMMUNICATIONS - GENERAL	<ul style="list-style-type: none"> ✓ Communications Plan Adopted ✓ Finalize and Implement Style Guide ✓ Update FAQs ✓ Finalize and Publish Brochure ✓ Draft History Document 	<ul style="list-style-type: none"> ✓ Monitor and Update Web and Print Content as Needed ✓ Finalize and Publish History Document 	<ul style="list-style-type: none"> ✓ Monitor and Update Web and Print Content as Needed 	<ul style="list-style-type: none"> • Monitor and Update Web and Print Content as Needed

Legend: Gray = Complete; Purple = In progress; Orange = On hold; Red = Behind schedule

COMMUNICATIONS - PAYER	✓ Ad Hoc	✓ Statutory Letter ¹ / Vaccine Grid Mailing ✓ Ad Hoc ✓ Developed and Sent Payer Check List	✓ See Compliance Workstream	• See Compliance Workstream
COMMUNICATIONS - PROVIDER	✓ Direct Practice Research ✓ Partner with DOH on Provider Communications ✓ Ad Hoc	✓ Vaccine Grid Mailing ✓ Partner with DOH on Provider Communications ✓ Ad Hoc ✓ Developed and Sent Provider Check List	✓ Partner with DOH on Provider Communications ✓ Ad Hoc	• Partner with DOH on Provider Communications • Ad Hoc
OPERATIONS	✓ Quarterly Policies and Procedures Maintenance Updates ✓ Ongoing Payer Database Maintenance	✓ Quarterly Policies and Procedures Maintenance Updates ✓ Ongoing Payer Database Maintenance	✓ Quarterly Policies and Procedures Maintenance Updates ✓ Ongoing Payer Database Maintenance • Annual Contractor Performance Review	• Quarterly Policies and Procedures Maintenance Updates • Ongoing Payer Database Maintenance
FINANCE	✓ Review and Revise Cash Management Strategy (Cont.) ✓ FY2022 Grid and FY2022 Budget Development ✓ Review and Revise Investment Policy Statement	✓ Annual Audit Preparation ✓ FY2022 Grid and FY2022 Budget Approval	✓ Annual Audit Performed ✓ Annual Review of Banking Account Authorizations / Access Privileges ✓ Review Cash/Reserves Position	

Updated 10.04.2021

¹ New format replaced former sent in the fall.

Legend: Gray = Complete; Purple = In progress; Orange = On hold; Red = Behind schedule

WORKSTREAM	Q1 CY2022	Q2 CY2022	Q3 CY2022	Q4 CY2022
GOVERNANCE	<ul style="list-style-type: none"> Hire Governance Consultant Develop Consultant Work Plan Engage Work Plan 	<ul style="list-style-type: none"> Board Retreat Engage Work Plan 	<ul style="list-style-type: none"> Engage Work Plan HR Policies Drafted 	<ul style="list-style-type: none"> HR Policies Approved Election of Officers and Committee Chairs Set CY2023 Meeting Schedule Publish Annual Report Set CY2023 Annual Goals
COMPLIANCE - PAYER	<ul style="list-style-type: none"> Payer – Second Tier Compliance Review 	<ul style="list-style-type: none"> Payer – Second Tier Compliance Review 	<ul style="list-style-type: none"> Payer – Second Tier Compliance Review 	<ul style="list-style-type: none"> Payer – Second Tier Compliance Review
COMPLIANCE - PROVIDER	<ul style="list-style-type: none"> Revise Payer and Provider Guide & Provider Check List Revise DOH Provider Agreement Partner with DOH on Non-Billing Practices 	<ul style="list-style-type: none"> Work with DOH to Add TIN to Annual Provider Survey Partner with DOH on Non-Billing Practices Other WVA-DOH Joint Projects 	<ul style="list-style-type: none"> Partner with DOH on Non-Billing Practices Other WVA-DOH Joint Projects 	<ul style="list-style-type: none"> Partner with DOH on Non-Billing Practices Other WVA-DOH Joint Projects
COMMUNICATIONS - GENERAL	<ul style="list-style-type: none"> Explore Interactive Web Presence Monitor and Update Web and Print Content as Needed 	<ul style="list-style-type: none"> Monitor and Update Web and Print Content as Needed 	<ul style="list-style-type: none"> Monitor and Update Web and Print Content as Needed 	<ul style="list-style-type: none"> Monitor and Update Web and Print Content as Needed
COMMUNICATIONS - PAYER	<ul style="list-style-type: none"> See Compliance Workstream 	<ul style="list-style-type: none"> Statutory Letter / Vaccine Grid Mailing Revise and Send Payer Check List See Compliance Workstream 	<ul style="list-style-type: none"> See Compliance Workstream 	<ul style="list-style-type: none"> See Compliance Workstream
COMMUNICATIONS - PROVIDER	<ul style="list-style-type: none"> Partner with DOH on Provider Communications 	<ul style="list-style-type: none"> FY2023 Vaccine Grid Mailing Revise and Send Provider Checklist Partner with DOH on Provider Communications 	<ul style="list-style-type: none"> Partner with DOH on Provider Communications 	<ul style="list-style-type: none"> Partner with DOH on Provider Communications

Legend: Blue = Board Task; Gray = Complete; Purple = In progress; Orange = On hold; Red = Behind schedule

Operations	<ul style="list-style-type: none"> Maintain ERA (93¹%) and ACH (94%) Volumes Quarterly Policies and Procedures Maintenance Updates Ongoing Payer Database Maintenance 	<ul style="list-style-type: none"> Maintain ERA (93%) and ACH (94%) Volumes Quarterly Policies and Procedures Maintenance Updates Ongoing Payer Database Maintenance Annual Contractor Performance Review 	<ul style="list-style-type: none"> Maintain ERA (93%) and ACH (94%) Volumes Quarterly Policies and Procedures Maintenance Updates Ongoing Payer Database Maintenance 	<ul style="list-style-type: none"> Maintain ERA (93%) and ACH (94%) Volumes Quarterly Policies and Procedures Maintenance Updates Ongoing Payer Database Maintenance
Finance	<ul style="list-style-type: none"> FY2023 Grid and FY2023 Budget Development / Set Grid Targets 	<ul style="list-style-type: none"> Annual Audit Preparation FY2023 Grid and FY2023 Budget Approval 	<ul style="list-style-type: none"> Annual Audit Performed Annual Review of Banking Account Authorizations / Access Privileges 	

Updated 10.04.2021

¹ One of WVA's key payers has a sizable line of business that does not offer electronic remittance advices (RAs) which is impacting this number from increasing above 93% for the foreseeable future. All paper RAs are digitized currently.

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