

What: Vaccine Committee Agenda

Date & Time: November 7, 2024; 11:30 a.m. - 12:30 p.m. PT

Location: In-Person & Virtual via Zoom

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

Approx. Time	Pg.		Topic/[Anticipated Action]	Presented by:
11:30-11:35 a.m.			1. Welcome & Introductions a. Notification of Recording	E. Marcuse J. Zell
11:35 a.m.	Pg. 3-4	*	2. Consent Calendar Items a. Approve Vaccine Committee Minutes (March 7, 2024)	E. Marcuse
11:35-11:40 a.m.			3. Review of Prior Year Milestones a. Financing RSV b. Non-traditional Provider Enrollment c. HCA/WVA Billing Guidance	J. Zell C. Cagle
11:40-11:50 a.m.			4. Current Challenges / Vaccine Supply & Distribution a. RSV Vaccine Updates & Uptake b. COVID Vaccine Updates & Uptake	J. Sherls
11:50-12:05 p.m.			5. Office Experiences & Challenges	A. Carter K. Rice C. Jenner
12:05-12:15 p.m.	Pg. 5-7	*	6. WVA Update on Immediate Challenges a. Rebuilding Cash Reserves b. Renewing DOH WVA MOU c. Addressing Cybersecurity	J. Zell
12:15-12:25 p.m.	Pg. 8-10	*	7. WVA Vaccine Committee Charter Discussion	E. Marcuse
12:25 p.m.			8. Public Comment	Any
12:25-12:30 p.m.			9. Executive Session	Members Only
12:30 p.m.			10. Closing	E. Marcuse

*Indicates additional materials / **Red text indicates an action item**

November 7, 2024

WVA Meeting of the Vaccine Committee

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 and committee members.

Items under Agenda Section 2:

VOTED: To approve March 7, 2024 meeting minutes.

[To approve March 7, 2024 meeting with the changes suggested at the meeting.]

Meeting Minutes
Vaccine Committee Meeting
March 7, 2024; 12:00-1:00 p.m. PT

- I. Attendance.** This meeting was conducted solely by webinar. Participating in all or part of the meeting were the following individuals:

Members

Ed Marcuse, MD, Emeritus Professor of
Pediatrics, University of Washington, *Chair*
Amy Carter, MD, Allegro Pediatrics
John Dunn, MD, MPH, Kaiser
Libby Page, MPH, King County Public Health
Jeff Gombosky, Pharmaceutical Research and
Manufacturers of America
Carrie Jenner, MD, Pierce County Immunization
Coalition (PCIC)
Janel Jorgenson, Washington Department of Health
Jamilia Sherls-Jones, DNP, MPH, Washington
Department of Health
Amy Person, MD, Benton-Franklin Health District
Kristi A. Rice, MD, Providence

WVA

Julia G. Zell, MA, Esq., Executive Director
Cheri Cagle, Stakeholder Liaison
Sherri Zorn, MD, WVA Consultant
Helms & Company, Inc.
Patrick Miller, MPH, WVA, Administrative
Director
Ashley Ithal, MPH, Project Support Leader

Other

Breelyn Young, GSK
Chris Schattenkerk, Moderna
Lisa Templeton, Informed Choice WA
Natalie Chavez, Public Attendee

II. Summary of Actions Taken and/or Recommended

Actions Taken (votes adopted)

- i. To approve Vaccine Committee meeting minutes (April 27, 2023).
- ii. To approve Special Purpose Vaccine Committee meeting minutes (September 21, 2023).

III. Minutes

Welcome and Introductions

At 12:06 p.m. Dr. Marcuse called the meeting to order. Ms. Zell announced that the meeting would be recorded for the benefit of the minute taker, to be deleted once the minutes are approved.

Calendar Consent Items

Dr. Marcuse asked for a motion to approve the minutes. Upon motion duly made and seconded, it was unanimously

- i. **VOTED: To approve the Vaccine Committee meeting minutes (April 27, 2023).**
- ii. **VOTED: To approve the Special Purpose Vaccine Committee meeting minutes (September 21, 2023).**

IV. Nirsevimab Update

Ms. Jorgenson provided an update on the ordering process including challenges with product shortages for nirsevimab this season. She reminded the group that a week into provider ordering the DOH was notified by the CDC of product shortages impacting availability of nirsevimab this season. Ms. Jorgenson reported that DOH has distributed approximately 30,000 doses of nirsevimab to date. RSV season in Washington ends March 31, and much of the product ordered this season can be held and used next season due to a longer shelf life. The DOH noted that they are interested in learning more from providers about the demand in practice and uptake of this product. Dr. Carter noted that next year should be more successful in terms of ordering and planning early in the season. Dr. Dunn reiterated that sentiment.

Ms. Sherls-Jones reported that to date there have been approximately 7,300 people who have received a maternal dose of Abrysvo. Ms. Sherls-Jones shared the RSV coverage dashboard link (<https://doh.wa.gov/data-and-statistical->

[reports/diseases-and-chronic-conditions/communicable-disease-surveillance-data/respiratory-illness-data-dashboard](#))
with the Committee.

Dr. Dunn reported that the legislative change to the WVA's authorizing statute has passed the House and Senate and is awaiting signature from Governor Inslee.

V. Respiratory Vaccine Distribution and Challenges

Influenza Vaccine

Ms. Jorgenson reported that the overall uptake for influenza vaccination is approximately 30%, which remains similar to last season and lower than pre-pandemic levels. Ms. Shelrs-Jones added that approximately 27% of children between 6 months and aged 17 received at least one dose of influenza vaccine for the season so far. Dr. Carter noted that her practice privately purchased influenza vaccine to support mass drive-through vaccination events. She noted they administered approximately 43,000 doses this year which is 2% less than the previous season.

COVID-19 Vaccine

Dr. Marcuse reported that he was unaware of any new information for childhood COVID-19 vaccination in the past few months. Dr. Zorn reported that she had heard from some adults that they thought the COVID-19 vaccine was part of a combination vaccine, and she subsequently provided education that COVID-19 vaccines were separate.

VI. Assessment of MMR Coverage by Geographic Area

Ms. Jorgenson shared an overview of MMR coverage. She reported that 77.6% of school aged children (7-18 years of age) have received two or more doses of MMR as of February 29, 2024. There was concern expressed by some Committee members regarding the low uptake rates. Ms. Ithal will distribute this presentation to the Committee.

VII. WVA Updates

Provider Outreach Efforts

Ms. Zell reported that the WVA is attempting to identify and conduct outreach to different provider types that do not currently complete the WVA dosage based assessment (DBA). Outreach to enrolled hospitals has been completed, and the WVA expects active participation in assessment generation by July 1, 2024. Additional provider types that are not currently completing the DBA but are receiving state-supplied vaccine include direct care practices, school-based health clinics, local health jurisdictions, the mobile clinic, and pharmacies. The WVA Board has concerns about providing vaccines to these provider types without active completion of the DBA process. Ms. Zell reported that there is a current policy exemption for local health jurisdictions from completing the DBA process, and a policy will be developed for the other provider types. Ms. Zell noted that the WVA is working closely with the DOH on provider outreach efforts.

VIII. Public Comments

Public comments were heard.

IX. Closing

The meeting adjourned at 1:00 p.m. PT.

CY2023 and CY2024 Impacts on Cash Reserves

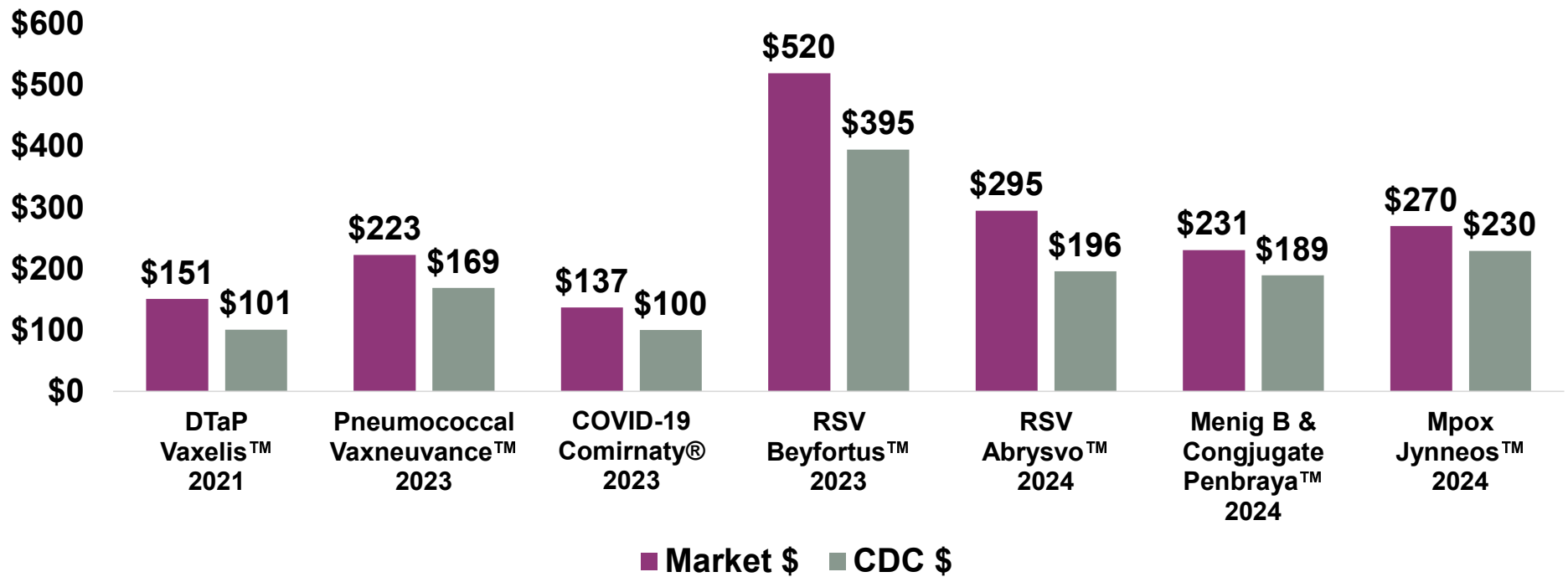
CY2023 Item	Cost	Recoupment	Net Impact
2023 Influenza Purchases	(\$4,436,476)	\$2,481,162	(\$1,955,314)
2023 COVID-19 Purchases	(\$10,058,512)	\$5,690,393	(4,368,119)
2023 RSV Purchases (no DBAs received)	(\$5,569,374)	n/a	(\$5,569,374)
Total	(\$20,064,362)	\$8,171,555	(\$11,892,807)

CY2024 Item	Pre-Funding Cost	Recoupment (as of Oct 30)	Net Impact
2024 Pre-Funding of Fall 2024 Influenza (prior to DBA receipt)	(\$3,508,813)	\$534,578	Interim – collections in process
2024 Pre-Funding of Fall 2024 COVID-19 (prior to DBA receipt)	(\$3,798,096)	\$1,712,145	
2024 Pre-Funding of Fall 2024 RSV (prior to DBA receipt)	(\$5,530,000)	\$821,531	
Total	(\$12,836,909)	\$3,070,114	

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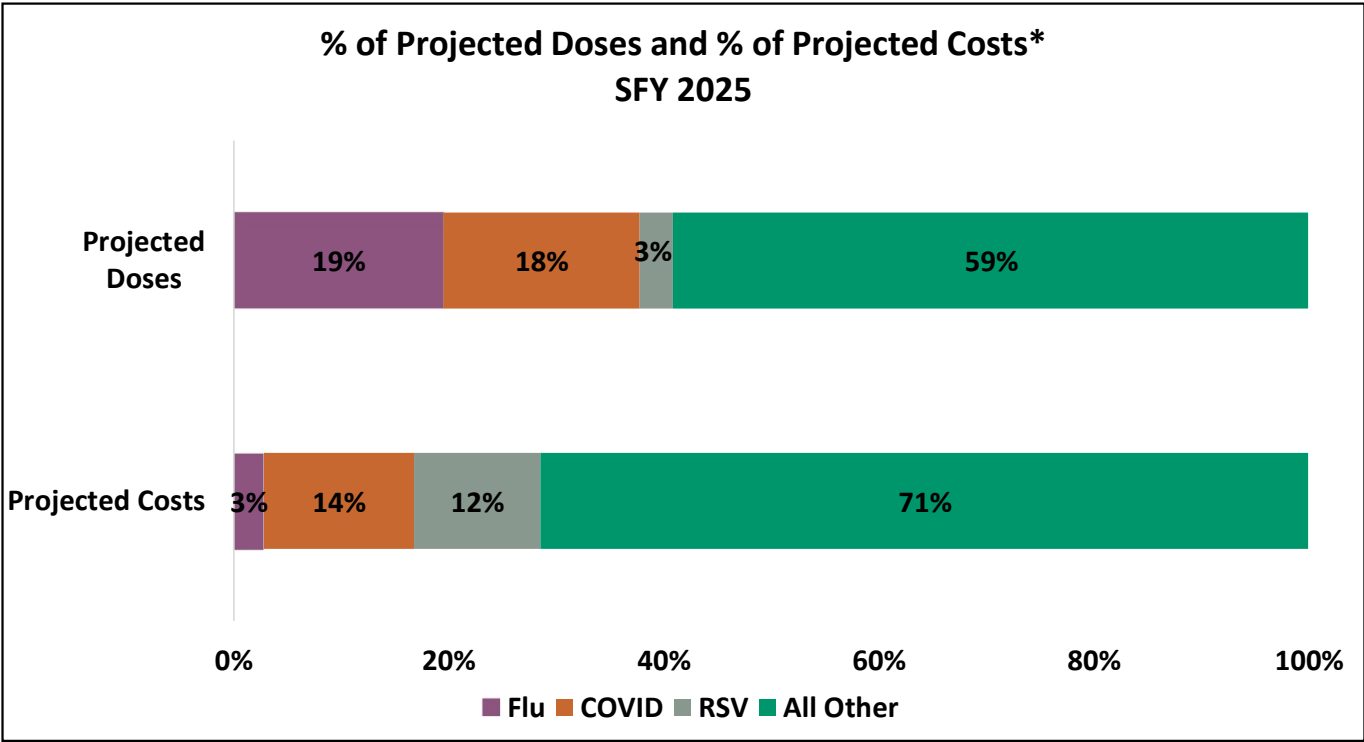
Recent Market Additions

Vaccine Prices





RSV Nirsevimab & Influenza – A Tale of Two Immunizations



Washington Vaccine Association VACCINE COMMITTEE CHARTER

Purpose:

The Washington Vaccine Association (the Association) Vaccine Committee (the Committee) is established pursuant to the requirements of Chapter 70.290 RCW for the purpose of making recommendations to the WVA Board of Directors (the Board) on specific vaccines to be purchased in each upcoming year by the Washington State Department of Health (the Department). As required by RCW 70.290.050, factors the Committee will strongly consider when making recommendations to the Association Board on selecting vaccines include:

- Patient safety and clinical efficacy
- Public health and purchaser value
- Patient and provider choice
- Stability of vaccine supply
- Compliance with RCW 70.95M.115 recodified at RCW 70A.230.120.

Key Activities:

The Committee will fulfill its responsibilities through the following activities:

- Evaluate the use of vaccines from a clinical, pharmacoeconomic and ethical perspective
- Promote safety, effectiveness, and improved health outcomes from vaccination
- Be informed by the deliberations and recommendations of the Department Vaccine Advisory Committee (the VAC).

Meeting Frequency and Notice:

The Committee will meet at least two times per year with notice provided in the manner set forth in the Association bylaws for Board meetings. Committee members are required to attend meetings in person, by conference telephone, or by videoconference.

Reporting Frequency:

- The Committee will report to the Board at least two times per year.

Membership:

As required by RCW 70.29.050, the Committee shall consist of five voting Board members, one non-voting member and two non-voting ex officio members as set forth below. The representative of the vaccine manufacturer must be chosen by the Secretary of the Department from a list of three nominees submitted collectively by vaccine manufacturers on an annual basis as required by RCW 70.290.050. Other participants and/or consultants may be invited from time to time to assist the committee. The Chair or Vice-chair will be a physician and Association Board member.

Washington Vaccine Association VACCINE COMMITTEE CHARTER

Description of Committee Membership Positions:

Position/Title	Qualifications
<i>Vaccine Committee Voting Members</i>	
1. Physician (Chair)	Member of the Association Board
2. Health Carrier/TPA Member	Member of the Association Board
3. Health Carrier/TPA Member	Member of the Association Board
4. Health Carrier/TPA Member	Member of the Association Board
5. DOH Secretary Designee	Member of the Association Board

<i>Non-voting Member</i>	
1. Representative of Manufacturers	Designated by the Secretary, the Department

<i>Ex Officio Members (Without Vote)</i>	
1. Executive Director of the Association	
2. Director Department Immunization Program/ Child Profile	

Member Responsibilities:

Members will comply with the Conflict of Interest policy of the Association and complete and sign a statement declaring potential conflicts of interest annually and are responsible for informing the Committee Chair and Executive Director of any pertinent changes during the year.

Motions may be made and seconded only by voting members. Majority vote of voting members carries a motion.

Members are responsible for rendering decisions regarding the recommendations as required, based upon best available vaccine clinical evidence and on outcomes modeling current best practice standards.

Members shall not have responsibility for making business decisions involving Association processes for vaccine assessment amounts.

Quorum:

A quorum consists of at least three voting members of the Committee.

Consultants and/or Other Participants

To ensure that the Committee's deliberations are informed by the perspectives of primary care clinicians (pediatricians, or family practice physicians including physicians engaged in office-based practice (versus institutional practices)), local health officers, pharmacists and Department staff with expertise in vaccine supply and, from time to time others with needed special expertise, the Committee may request that consultants participate in its meetings.

**Washington Vaccine Association
VACCINE COMMITTEE
CHARTER**

Approval and Review:

This charter will be periodically reviewed by the Committee and any recommended revisions approved by the WVA Board.

Charge Author:	WVA Vaccine Committee
Approving Body:	WVA Board of Directors and Executive Director

Reviewed By: Vaccine Committee	Date: November 17, 2022
Approved By: WVA Board of Directors	Date: