

What: Operations Committee Meeting
 Date & Time: April 24, 2025; 12:30-1:30 p.m. PT
 Location: Zoom (Individualized Invitation Links Sent)

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	*	Page	Topic/[Anticipated Action]	Presented by:
12:30-12:35 p.m.			1. Introductions & Agenda Review a. Notice of Recording b. Survey of Other Topics	J. Zell
12:35-12:40 p.m.	*	Pg. 4-5	2. Action Items a. Vote to Approve Operations Committee Minutes - October 24, 2024	J. Zell
12:40-1:00 p.m.	*	Pg. 6-20	3. Assessment Grid 2025-26 a. Vote to Finalize 2025-26 Assessment Grid	J. Zell / P. Miller
1:00-1:25 p.m.	*	Pg. 21-25	4. Operational Updates a. Vaccine Assessment Loss Work	J. Zell / P. Miller
1:25-1:30 p.m.			5. Other Matters from Committee Members	Any
1:30 p.m.			6. Closing	J. Zell

*Indicates agenda item attached
 Red text indicates an action item

WASHINGTON VACCINE ASSOCIATION OPERATIONS COMMITTEE CHARTER

Purpose

The purpose of the Operations Committee (the Committee) of the board of directors (the Board) of the Washington Vaccine Association (the Association) is to provide advice on and recommend to the Board the assessment amounts for the specific vaccine dosages administered by providers in the Washington State Childhood Vaccine Program, to advise the Board on the DBA submission process, on compliance matters and on other matters referred to the Committee from time to time.

Meetings and Notice

The Committee shall meet as frequently as needed to fulfill its charter and to address matters on its agenda, but not less frequently than two times per year. The Committee may, but shall not be required, to establish a regularly scheduled time and place for meetings. Notice of meetings shall be as required and set forth in the Association bylaws for Board meetings. Committee members are required to attend meetings in person, by conference telephone, or by video conference.

Membership

The members of the Committee shall include two voting members of the Board, the Executive Director of the Association as an ex-officio non-voting member of the Committee, and such other members as shall be appointed by the Board. The Chair of the Committee shall be the Executive Director.

Quorum; Voting

A quorum for a meeting of the Committee shall consist of a majority of the members. The vote of a majority of the members of the Committee present at a meeting at which a quorum is present shall be sufficient to approve a proposed action.

Independent Advice; Engagement of Consultants

In discharging its responsibilities, the Committee shall have access to any relevant books, records, facilities, and personnel of the Association. The Committee, upon approval of the Board or Executive Committee, and at the Association's expense, may obtain advice and assistance from outside consultants to advise the Committee. The Committee may also request that the Executive Director, the Administrator of the Association, the Association's outside counsel, or any other person meet with any members of, or consultants to the Committee, or provide other assistance to the Committee in the discharge of its duties.

Approved by Committee

Date: October 20, 2021

Chair: J. Zell

April 24, 2025

WVA Meeting of the Operations 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 October 24, 2024 meeting minutes.

[To approved October 24, 2024 meeting with the changes suggested at the meeting.]

Items under Agenda Section 3:

VOTED: To finalize the 2025-26 Assessment Grid.

[To finalize the 2025-26 Assessment Grid with the changes suggested at the meeting.]

**Washington Vaccine Association
Operations Committee Meeting
October 24, 2024; 12:30-1:30 p.m. PT**

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

Members

Diana Baxter, Cambia/Regence
Tracy Cardillo, Cigna
Cathy Falanga, Aetna
Valerie Oliver, Premera
Kara Manley, United
Jennifer Simonsen, Kaiser
Janel Jorgenson, DOH

WVA

Julia Walter Zell, Esq., Executive Director, Chair
Cheri Cagle, Stakeholder Liaison

Helms & Company, Inc.

Patrick Miller, MPH, Administrative Director
Ashley Ithal, MPH, Project Support Leader
Lisa White, JD, Customer and Financial Support
Specialist
Leslie Walker, CPA, Mason+Rich, PA

Public Members

Erika Cliett, United
Tiffany Conley, Regence
Cheryl Rairigh, Regence
Lisa Templeton, InformedChoiceWA
Bob Runnels, InformedChoiceWA

II. Summary of Actions Taken and/or Recommended

Actions Taken (votes adopted)

- i. To approve April 25, 2024 meeting minutes.

III. Minutes

Welcome and Introductions

Ms. Zell called the meeting to order at 12:32 p.m., and provided a notice of recording for the purposes of the meeting minutes. She stated the recording will be deleted once the meeting minutes are approved

Consent Calendar

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

VOTED: To approve April 25, 2024 meeting minutes.

IV. Operational Updates

Non-traditional Provider Onboarding

Ms. Zell gave an overview on the status of onboarding providers that have been receiving vaccines through the Childhood Vaccine Program (CVP) but were not submitting Dosage Based Assessments (DBAs). She noted that the WVA team has spent the last year attempting to bring these non-traditional providers into compliance. These providers include the following non-traditional practice settings: mobile health clinics (including Department of Health (DOH) Care-A-Vans), School Based Health Clinics (SBHCs), Inpatient Hospitals, and Pharmacies. Although Local Health Jurisdictions (LHJs) currently have an exemption from submitting the DBA, the WVA has found that several are submitting the DBA as they are part of larger health systems. Mr. Miller added that the WVA partnered with the DOH in the summer of 2024 to convene work groups to understand barriers of SBHCs and LHJs, specifically, for submitting the DBA. He also noted that the DOH has halted onboarding new pharmacies unless they have to the ability to submit the DBA. Ms. Zell added that the Board will discuss progress on non-traditional providers at their November meeting.

Future Vaccine Assessment Grid

Ms. Zell reported that although the goal of the WVA is to keep the Grid flat across several years, there may be a need to modestly increase it in July 2025 to account for inflation and any new products added to the Vaccines for Children Program.

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Cash Reserves

Ms. Zell noted that part of the reason for a potential future Grid increase is due to WVA current cash reserves being at a low point. This is largely due to the increased cost of pre-funding respiratory vaccines coupled with vaccine wastage, The WVA is expecting to increase reserves over the next three years. Mr. Miller reviewed some of the major CY2023 and CY2024 events that had the largest impact on cash reserves.

Investment Policy Statement

Ms. Zell reported that the Finance Committee met to discuss cash reserve requirements and have updated the Investment Policy Statement (IPS) in order to ensure cash reserves are adequate on a go-forward basis and summarized changes.

New Vaccine Pipeline

Mr. Miller reported that WVA staff are monitoring the U.S. CDC’s Advisory Committee on Immunization Practices (ACIP) meetings to understand how new vaccines could impact future program funding.

Future Grid Communications

Mr. Miller provided an l update on new vaccines that have been added to the Grid in the past year. Ms. Zell asked for guidance form the group on best practices in notifying payers on new products and effectuating off-cycle Grid changes. Ms. Falanga asked that a simplified Grid for on-schedule and off-schedule changes be implemented. Discussion ensued.

Cybersecurity

Ms. Zell engaged with the WVA legal team this past summer to perform a cyber risk assessment. She added that the WVA is routinely reviewing and assuring that procedures are in place to protect PHI.

EHR Vendor Collaboration

Mr. Miller highlighted a recent collaboration with the EHR vendor athenahealth. The WVA team is developing a standardized implementation process for WA providers using athenahealth to ensure that all edits for submitting a DBA are correct. Due to the success to date, it is expected that this can be replicated with other EHR vendors in WA.

V. Public Comment – No public comments.

VI. Closing

Ms. Zell concluded the meeting at 1:24 p.m.

PRINTABLE ASSESSMENT GRID TAB

Washington Vaccine Association Assessment Grid
FOR ALL CLAIMS WITH A DATE OF SERVICE ON OR AFTER JULY 1, 2025.

**For Dosage-Based Assessment (DBA) Billing Used for
 Commercially Insured Patients Under the Age of 19.**

Please note that this **WVA Assessment Grid, effective July 1, 2025, replaces the grid last updated on July 1, 2024.** The grid lists vaccines and their corresponding CPT codes that are part of the dosage-based assessment (DBA) process for providers, health insurance carriers, and third party administrators. There are other childhood vaccines (and corresponding CPT codes) that are not included in the DBA process and, therefore, no assessment is needed. The availability of specific vaccine brands are determined by the manufacturer and not all brands of flu vaccine are offered through the Childhood Vaccine Program (CVP). **The ORANGE COLUMN with per dose amount in red is the assessment amount per dose as of July 1, 2025.**

CPT Code	NDC Code / Packaging	CPT Code Description	Tradename	WVA Assessment Amount Per Dose from 07/01/2024 to 06/30/2025	For Reference: CDC Private Sector Cost Per Dose 04/01/2025	WVA Assessment Amount Per Dose from 07/01/2025 to 06/30/2026	Percent Change 07/01/2024 to 07/01/2025
Hepatitis A							
90633	58160-0825-52 (10 pack – 1 dose syringe)	Hepatitis A vaccine (HepA), pediatric/adolescent dosage-2 dose schedule, for intramuscular use	Havrix®	\$29.54	\$39.13	\$36.63	24.0%
	00006-4095-02 (10 pack – 1 dose syringe)		Vaqta®		\$38.85		
Hepatitis B							
90744	00006-4981-00 (10 pack – 1 dose vial)	Hepatitis B vaccine (HepB), pediatric/adolescent dosage, 3 dose schedule, for intramuscular use	Recombivax HB®	\$18.19	\$27.91	\$22.56	24.0%
	00006-4093-02 (10 pack – 1 dose syringe)				Engerix B®		
	58160-0820-52 (10 pack – 1 dose syringe)						
Rotavirus							
90680	00006-4047-41 (10 pack – 1 dose tube)	Rotavirus vaccine, pentavalent (RV5), 3 dose schedule, live, for oral use	RotaTeq®	\$86.67	\$98.82	\$93.88	8.3%
	00006-4047-20 (25 pack – 1 oral dose)						
90681	58160-0854-52 (10 pack – 1 dose vial)	Rotavirus vaccine, human, attenuated (RV1), 2 dose schedule, live, for oral use	Rotarix®	\$115.56	\$147.02	\$143.31	24.0%
	58160-0740-21 (10 pack – 1 oral dose)						

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CPT Code	NDC Code / Packaging	CPT Code Description	Tradename	WVA Assessment Amount Per Dose from 07/01/2024 to 06/30/2025	For Reference: CDC Private Sector Cost Per Dose 04/01/2025	WVA Assessment Amount Per Dose from 07/01/2025 to 06/30/2026	Percent Change 07/01/2024 to 07/01/2025
DTaP							
90696	58160-0812-52 (10 pack – 1 dose syringe)	Diphtheria, tetanus toxoids, acellular pertussis vaccine and inactivated poliovirus vaccine (DTaP-IPV), when administered to children 4 through 6 years of age, for intramuscular use	Kinrix®	\$50.29	\$62.82	\$62.37	24.0%
	49281-0562-10 (10 pack – 1 dose vial)		Quadracel™		\$64.57		
	49281-0564-10 (10 pack – 1 dose vial)						
	49281-0564-15 (10 pack – 1 dose syringe)						
90697	63361-0243-15 (10 pack – 1 dose syringe)	Diphtheria and tetanus toxoids and acellular pertussis adsorbed, inactivated poliovirus, Haemophilus b conjugate (meningococcal protein conjugate), and Hepatitis B (recombinant) vaccine	Vaxelis™	\$125.19	\$156.70	\$155.25	24.0%
	63361-0243-10 (10 pack – 1 dose vial)						
90698	49281-0511-05 (5 pack – 1 dose vial)	Diphtheria, tetanus toxoids, acellular pertussis vaccine, Haemophilus influenzae type b, and inactivated poliovirus vaccine, (DTaP-IPV/Hib), for intramuscular use	Pentacel®	\$95.23	\$120.06	\$118.10	24.0%
90700	49281-0286-10 (10 pack – 1 dose vial)	Diphtheria, tetanus toxoids, and acellular pertussis vaccine (DTaP), when administered to individuals younger than seven years, for intramuscular use	Daptacel®	\$22.47	\$30.39	\$27.87	24.0%
	58160-0810-52 (10 pack – 1 dose syringe)		Infanrix®		\$29.59		
90723	58160-0811-52 (10 pack – 1 dose syringe)	Diphtheria, tetanus toxoids, acellular pertussis vaccine, hepatitis B, and inactivated poliovirus vaccine (DTaP-HepB-IPV), for intramuscular use	Pediarix®	\$71.76	\$103.62	\$88.99	24.0%
Tdap							
90714	49281-0215-15 (10 pack – 1 dose syringe)	Tetanus and diphtheria toxoids adsorbed (Td), preservative free, when administered to individuals 7 years or older, for intramuscular use	Tenivac®	\$25.68	\$40.31	\$23.95	-6.7%
	49281-0215-10 (10 pack – 1 dose vial)						
	13533-0131-01 (10 pack – 1 dose vial)	Tetanus and diphtheria toxoids (Td) adsorbed when administered to individuals 7 years or older, for intramuscular use	TDVAX™				

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90715	58160-0842-52 (10 pack – 1 dose syringe)	Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap), when administered to individuals 7 years or older, for intramuscular use	Boostrix®	\$39.59	\$48.75	\$46.31	17.0%
	49281-0400-10 (10 pack – 1 dose vial)		Adacel®		\$49.20		
	49281-0400-20 (5 pack – 1 dose syringe)						
Haemophilus Influenzae							
90647	00006-4897-00 (10 pack – 1 dose vial)	Haemophilus influenzae type b vaccine (Hib), PRP-OMP conjugate, 3 dose schedule, for intramuscular use	PedvaxHIB®	\$17.12	\$30.58	\$21.23	24.0%
90648	49281-0545-03 (5 pack – 1 dose vial)	Haemophilus influenzae type b vaccine (Hib), PRP-T conjugate, 4 dose schedule, for intramuscular use	ActHIB®	\$10.72	\$13.41	\$13.29	24.0%
	58160-0726-15 (10 pack – 1 dose vial)		Hiberix®		\$13.17		
	58160-0818-11 (10 pack – 1 dose vial)						
Pneumococcal							
90670	00005-1971-02 (10 pack – 1 dose syringe)	Pneumococcal conjugate vaccine, 13 valent (PCV13), for intramuscular use	Prenar 13™	\$216.14	\$226.43	\$216.14	0.0%
90677	00005-2000-10 (10 pack – 1 dose syringe)	Pneumococcal conjugate vaccine, 20 valent (PCV20), for intramuscular use	Prenar 20™	\$216.14	\$274.60	\$268.04	24.0%
90671	00006-4329-03 (10 pack – 1 dose syringe)	Pneumococcal conjugate PCV15, polysaccharide CRM197 conjugate, adjuvant, PF	Vaxneuvance™	\$194.81	\$229.20	\$217.74	11.8%
90732	00006-4837-03 (10 pack – 1 dose syringe)	Pneumococcal polysaccharide vaccine, 23-valent (PPSV23), adult or immunosuppressed patient dosage, when administered to individuals 2 years or older, for subcutaneous or intramuscular use	Pneumovax® 23	\$93.67	\$117.08	\$116.16	24.0%
Inactivated Poliovirus							
90713	49281-0860-10 (10 dose vial)	Poliovirus vaccine, inactivated (IPV), for subcutaneous or intramuscular use	IPOL®	\$17.12	\$44.73	\$21.23	24.0%

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MMR							
90707	00006-4681-00 (10 pack – 1 dose vial)	Measles, mumps and rubella virus vaccine (MMR), live, for subcutaneous use	M-M-R®II	\$27.82	\$95.20	\$34.50	24.0%
	58160-0824-15 (10 pack – 1 dose vial)		Priorix				
90710	00006-4171-00 (10 pack – 1 dose vial)	Measles, mumps, rubella, and varicella vaccine (MMRV), live, for subcutaneous use	ProQuad®	\$223.63	\$278.16	\$277.33	24.0%
Varicella							
90716	00006-4827-00 (10 pack – 1 dose vial)	Varicella virus vaccine (VAR), live, for subcutaneous use	Varivax®	\$150.87	\$183.00	\$173.85	15.2%
HPV							
90651	00006-4121-02 (10 pack – 1 dose syringe)	Human Papillomavirus vaccine types 6, 11, 16, 18, 31, 33, 45, 52, 58, nonavalent (9vHPV), 2 or 3 dose schedule, for intramuscular use	Gardasil®9	\$215.02	\$307.61	\$301.46	40.2%
Meningococcal B							
90620	58160-0976-20 (10 pack – 1 dose syringe)	Meningococcal recombinant protein and outer membrane vesicle vaccine, serogroup B (MenB-4C), 2 dose schedule, for intramuscular use	Bexsero®	\$179.76	\$237.13	\$222.92	24.0%
90621	00005-0100-10 (10 pack – 1 dose syringe)	Meningococcal recombinant lipoprotein vaccine, serogroup B (MenB-FHbp), 2 or 3 dose schedule, for intramuscular use	Trumenba®	\$145.52	\$207.32	\$180.46	24.0%
Meningococcal Conjugate							
90619	49281-0590-05 (5 pack – 1 dose vial)	Meningococcal polysaccharide (groups A, C, Y, W-135) tetanus toxoid conjugate vaccine .5ml dose, preservative free	MenQuadfi™	\$132.68	\$171.98	\$164.54	24.0%
	49281-0590-10 (10 pack – 1 dose vial)						
90734	58160-0827-30 (10 pack – 1 dose vial)	Meningococcal conjugate vaccine, serogroups A, C, Y and W-135, quadrivalent (MCV4 or MenACWY), for intramuscular use	Menveo® One Vial	\$126.26	\$166.75	\$156.58	24.0%
	58160-0955-09 (5 pack – 1 dose vial)		Menveo® Two Vial				

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CPT Code	NDC Code / Packaging	CPT Code Description	Tradename	WVA Assessment Amount Per Dose from 07/01/2024 to 06/30/2025	For Reference: CDC Private Sector Cost Per Dose 04/01/2025	WVA Assessment Amount Per Dose from 07/01/2025 to 06/30/2026	Percent Change 07/01/2024 to 07/01/2025
Meningococcal B & Conjugate							
90623	00069-0600-01 (1 pack – 1 dose vial)	Meningococcal pentavalent vaccine, conjugated Men A, C, W, Y- tetanus toxoid carrier, and Men B-FHbp, for intramuscular use	PENBRAYA™	\$207.57	\$230.75	\$219.21	24.0%
	00069-0600-05 (5 pack – 1 dose vial)						
TBD	NDC TBD NEW: 07.01.2025 NDC TBD NEW: 07.01.2025		RENMENTVY	n/a	TBD	TBD	n/a
RSV - Respiratory Syncytial Virus							
90380	49281-0575-15 (5 pack – 1 dose syringe)	Respiratory syncytial virus, monoclonal antibody, seasonal dose; 0.5 mL dosage, for intramuscular use	Beyfortus™ (50mg)	\$450.00	\$556.13	\$545.00	21.1%
90381	49281-0574-15 (5 pack – 1 dose syringe)	Respiratory syncytial virus, monoclonal antibody, seasonal dose; 1.0 mL dosage, for intramuscular use	Beyfortus™ (100mg)	\$450.00	\$556.13	\$545.00	21.1%
90678	00069-0344-01 (1 pack – 1 dose vial)	RSV, bivalent, protein subunit RSVpref, diluent reconstituted, 0.5 mL, PF	ABRYSVO™	\$265.50	\$306.80	\$289.10	8.9%
Smallpox & Mpox - Age 18 Only							
90611	50632-0001-03 (10 pack - 1 dose vial)	Smallpox and monkeypox vaccine, attenuated vaccinia virus, live, non-replicating, preservative free, 0.5 mL dosage, suspension, for subcutaneous use	JYNNEOS®	\$275.40	\$270.00	\$256.50	-6.9%
COVID-19: PLEASE NOTE - New COVID-19 NDCs and Potentially CPTs Are Expected in Summer 2025 for Fall 2025 Rollout. WVA Will Provide an Update Then.							
91304	80631-0107-10 (10 pack - 1 dose syringe)	SARS-CoV-2 (COVID-19) vaccine, subunit, recombinant spike protein-nanoparticle+Matrix-M1 Adjuvant, preservative free, 5 mcg/0.5 mL dose	COVID-19 Vaccine (Novavax) (ages 12+ yrs)	\$113.00	\$141.70	\$141.00 Applies to All COVID-19 Codes	24.8%
91318	59267-4426-02 (10 pack- 3 dose vial)	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) vaccine, mRNA-LNP, spike protein, 3 mcg/0.3 mL dosage, tris-sucrose formulation, for intramuscular use	COVID-19 Vaccine (Pfizer) (ages 6 mos - 4 yrs)		\$57.50		
91319	59267-4438-02 (10 pack- 1 dose vial)	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) vaccine, mRNA-LNP, spike protein, 10 mcg/0.3 mL dosage, tris-sucrose formulation, for intramuscular use	COVID-19 Vaccine (Pfizer) (ages 5 - 11 yrs)		\$77.00		
91320	00069-2432-10 (10 pack – 1 dose syringe)	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) vaccine, mRNA-LNP, spike protein, 30 mcg/0.3 mL dosage, tris-sucrose formulation, for intramuscular use	COMIRNATY® (Pfizer) (ages 12+ yrs)		\$136.75		
91321	80777-0291-80 (10 pack – 1 dose syringe)	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) vaccine, mRNA-LNP, 25 mcg/0.25 mL dosage, for intramuscular use	COVID-19 Vaccine (Moderna) (ages 6 mos - 11 yrs)		\$129.00		

CPT Code	NDC Code / Packaging	CPT Code Description	Tradename	WVA Assessment Amount Per Dose from 07/01/2024 to 06/30/2025	For Reference: CDC Private Sector Cost Per Dose 04/01/2025	WVA Assessment Amount Per Dose from 07/01/2025 to 06/30/2026	Percent Change 07/01/2024 to 07/01/2025
91322	80777-0110-93 (10 pack - 1 dose syringe)	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) vaccine, mRNA-LNP, 50 mcg/0.5 mL dosage, for intramuscular use	Spikevax™ (Moderna) (ages 12+ yrs)	\$113.00	\$141.80	\$141.00	24.8%

Influenza

Note: All influenza codes for the period will have a Grid amount of \$18.00. The CPT and NDC numbers are new this season.

90656	49281-0425-50 (10 pack - 1 dose syringe)	Influenza virus vaccine, trivalent (IIV3), split virus, preservative free, 0.5 mL dosage, for intramuscular use	Fluzone® TIV	\$18.00	\$20.88	\$22.00 Applies to All Influenza Codes	24.0%
90656	19515-0904-52 (10 pack - 1 dose syringe)	Influenza virus vaccine, trivalent (IIV3), split virus, preservative free, 0.5 mL dosage, for intramuscular use	FluLaval® TIV		\$20.49		
90658	49281-0643-15 (1-pack; 10 dose vial)	Influenza virus vaccine, trivalent (IIV3), split virus, 0.5 mL dosage, for intramuscular use	Fluzone® TIV		\$19.49		
90661	70461-0655-03 (10 pack - 1 dose syringe)	Influenza virus vaccine, trivalent (ccIIV3), derived from cell cultures, subunit, antibiotic free, 0.5 mL dosage, for intramuscular use	Flucelvax® TIV		\$32.45		
90660	66019-0112-10 (10 pack - 1 dose sprayer, intranasal)	Influenza virus vaccine, trivalent, live (LAIV3), for intranasal use	FluMist® TIV		\$25.44		

NOTE: The WVA reserves the right to modify the Assessment Grid in effect at any time with Board approval and appropriate notification of payers.

To ensure proper DBA submission and carrier/TPA remittance to the WVA, providers should check the:

- **Date of service** to ensure the correct Grid year is being used;
- **CPT code** to ensure it is a valid code for the date of service (*see note below); and
- **Assessment Grid amount** to ensure proper DBA submission and carrier/TPA remittance to the WVA.

*Please note: Sometimes vaccine material is still viable and can be administered, even if it has been discontinued from prior or current Grids. If the CPT code is not shown on the Grid, providers should check the codes below to determine if a prior Grid amount should be billed on the DBA. Please validate the date of service when selecting the Grid year/amount.



3.a. FY2026 Vaccine Assessment Grid Setting

4.a. Vaccine Assessment Loss Work

APRIL 24, 2025 | OPERATIONS COMMITTEE SLIDES

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FY2026 Budget & Vaccine Grid Development Timeline



FY2026 Assessment Grid Setting Goals

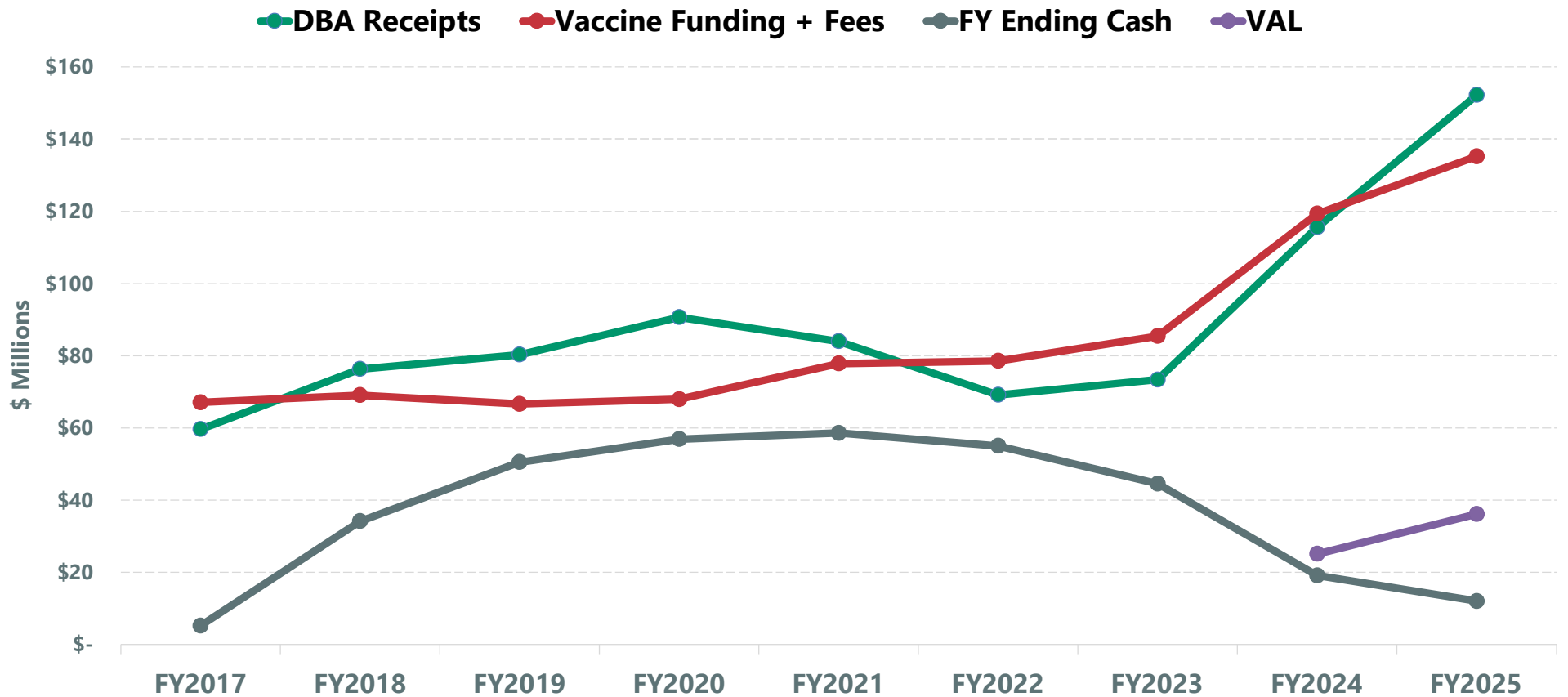
- » **REBUILD** Long Term Cash Reserves to a Level Appropriate to Meet WVA's Obligations
- » **MITIGATE** the Annual Respiratory Season Cash Needs
- » **ENSURE** Payer Equity and Value

Weighted Average Grid Amount & Weighted Private Sector Price

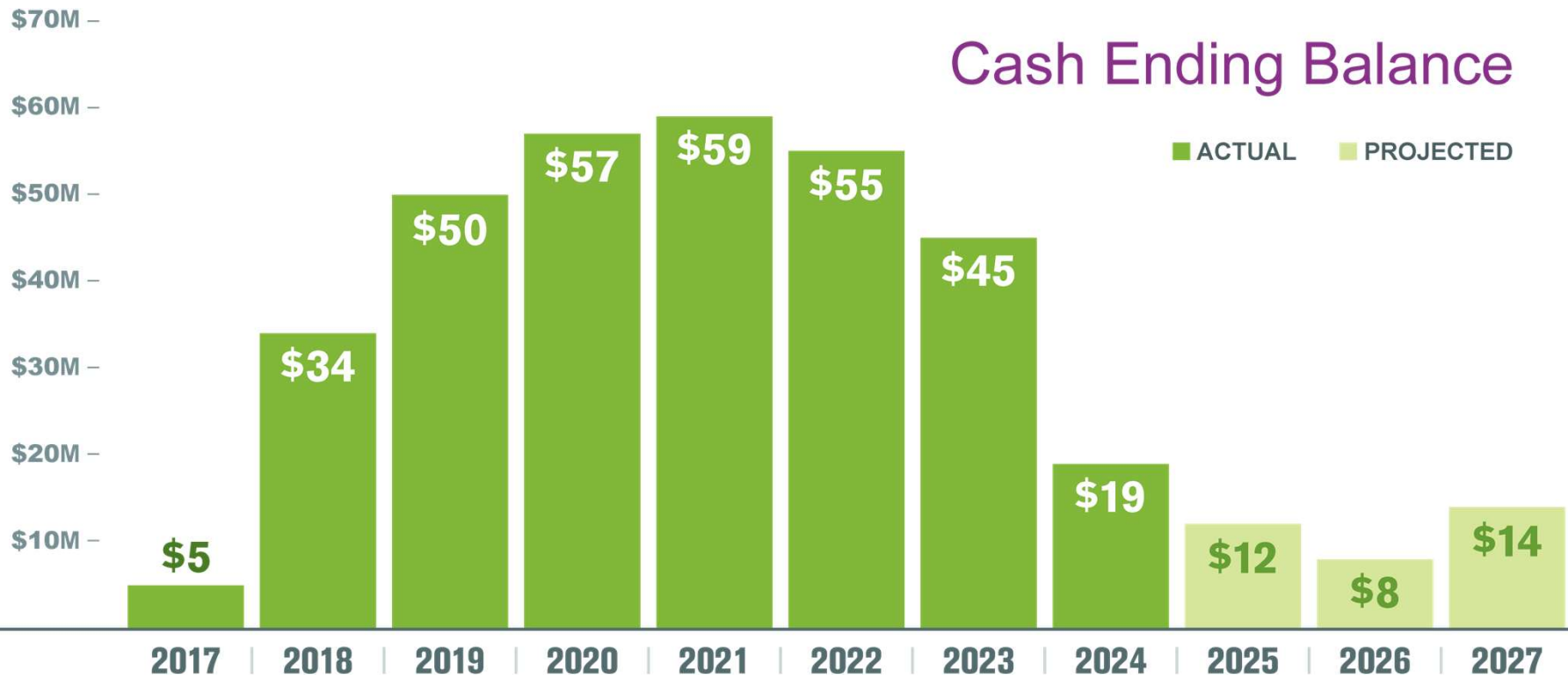


DBA Receipts, Vaccine Funding & Fees, FY Ending Cash, VAL by FY

Note: FY2025 is Incomplete



FY2025-27 Revised Cash Projection Targets



FY2026 Assessment Grid Setting Key Drivers

- 1 Fund Source Split**
Increased from 47% to 51.5% (varies by vaccine and by provider)
- 2 Wastage**
Increased in FY2024 to 5.9% overall with higher amounts for respiratory products
- 3 Indirect Rate**
Currently 1.4% of vaccines funded
- 4 Cost Recovery Rate**
Currently up to 2.8% of vaccines funded; Budgeted \$1.6M for FY2026
- 5 Vaccine Pipeline**
Expectation of new products in FY2026-2028 with high impact
- 6 Vaccine Assessment Loss**
Gap of \$20M to be closed in FY2026-27



FY2024-25 Actual and Projected Write Downs

PRODUCT	2024 ACTUAL	2025 <i>PROJECTED</i>
Influenza	\$1,955,314	\$1,400,000
COVID-19	\$4,368,119	\$4,100,000
Year 1 RSV: Decision to not collect DBAs	\$5,569,374	N/A
Year 2 RSV: Expired from prior year	N/A	\$3,382,385
Year 2 RSV: Other	N/A	\$1,300,000
TOTALS	\$11,892,807 Actual	\$10,382,385 <i>Projected</i>

FY2024-27 Model Summary

CATEGORY	FY2024	FY2025	FY2026	FY2027
Grid Change as % of Prior Year	110%	119%	124%	105%
Fund Source Split %	47%	47%	51.5%	51.5%
DOH Indirect Charge	\$1,520,359	\$1,554,054	\$1,643,001	\$1,807,386
DOH Cost Recovery Amount	\$1,534,301	\$1,125,099	\$1,600,000	\$1,600,000
Vaccine Assessment Loss TBD	\$25,046,989	\$36,100,712	\$35,752,608	\$28,953,217
STARTING BALANCE	\$44,528,985	\$19,120,795	\$12,000,000	\$7,847,240
ENDING BALANCE	\$19,120,795	\$12,000,000	\$7,847,240	\$14,489,346

| 2024 | 2025 | 2026 | 2027 |

What is Vaccine Assessment Loss (VAL)?

Uncollected funds for vaccines funded by the WVA. This can create deficits and reduce net beneficial impact of CDC discounts.

VAL FACTORS



- Policy changes
*Example: CY2024
COVID-19 write-offs*

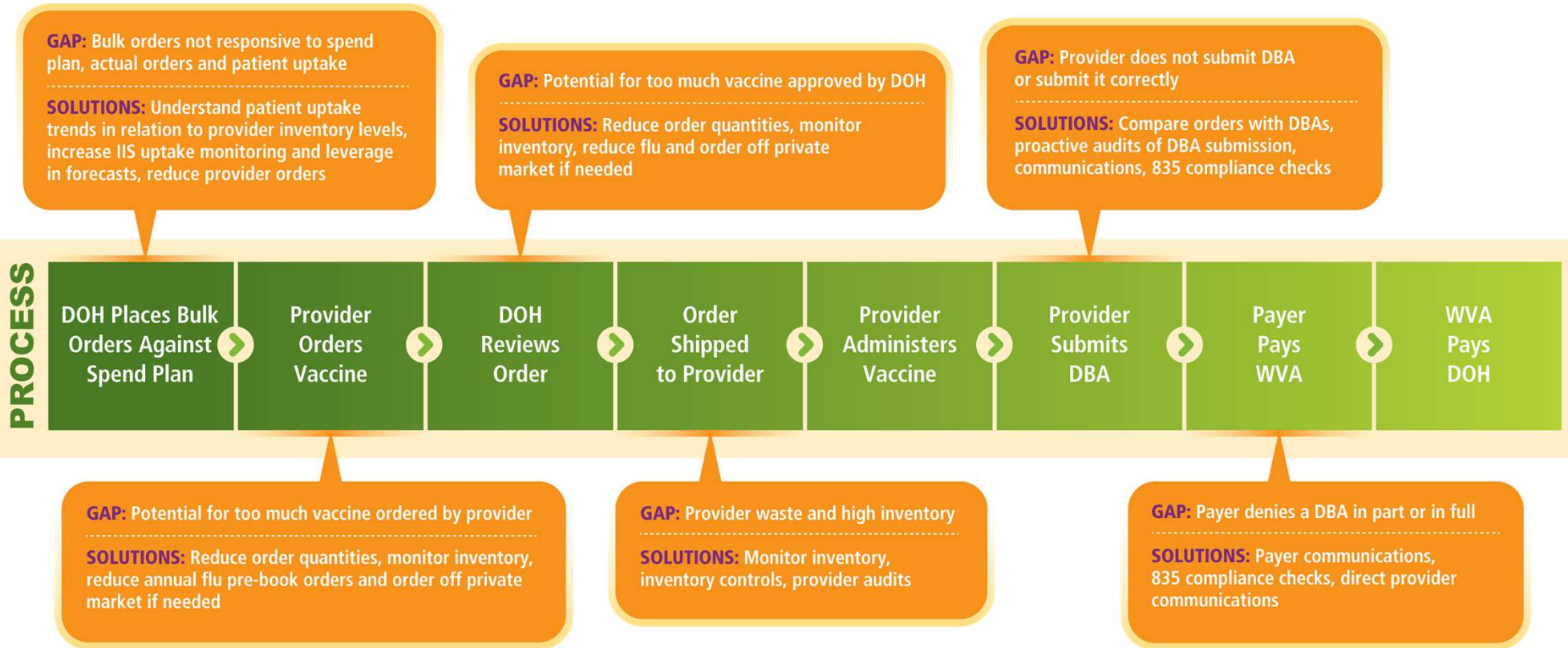


- Order forecast accuracy
- Provider inventory management
 - Provider order management
 - Provider ordering accuracy
 - Provider-to-provider transfers
- Provider DBA exemptions
- Unshipped, vaccine expiration



- DBA not billed by provider
- DBA billed incorrectly by provider
- DBA fully or partially denied by payer

Vaccine Assessment Loss – DRAFT GAPS & SOLUTIONS



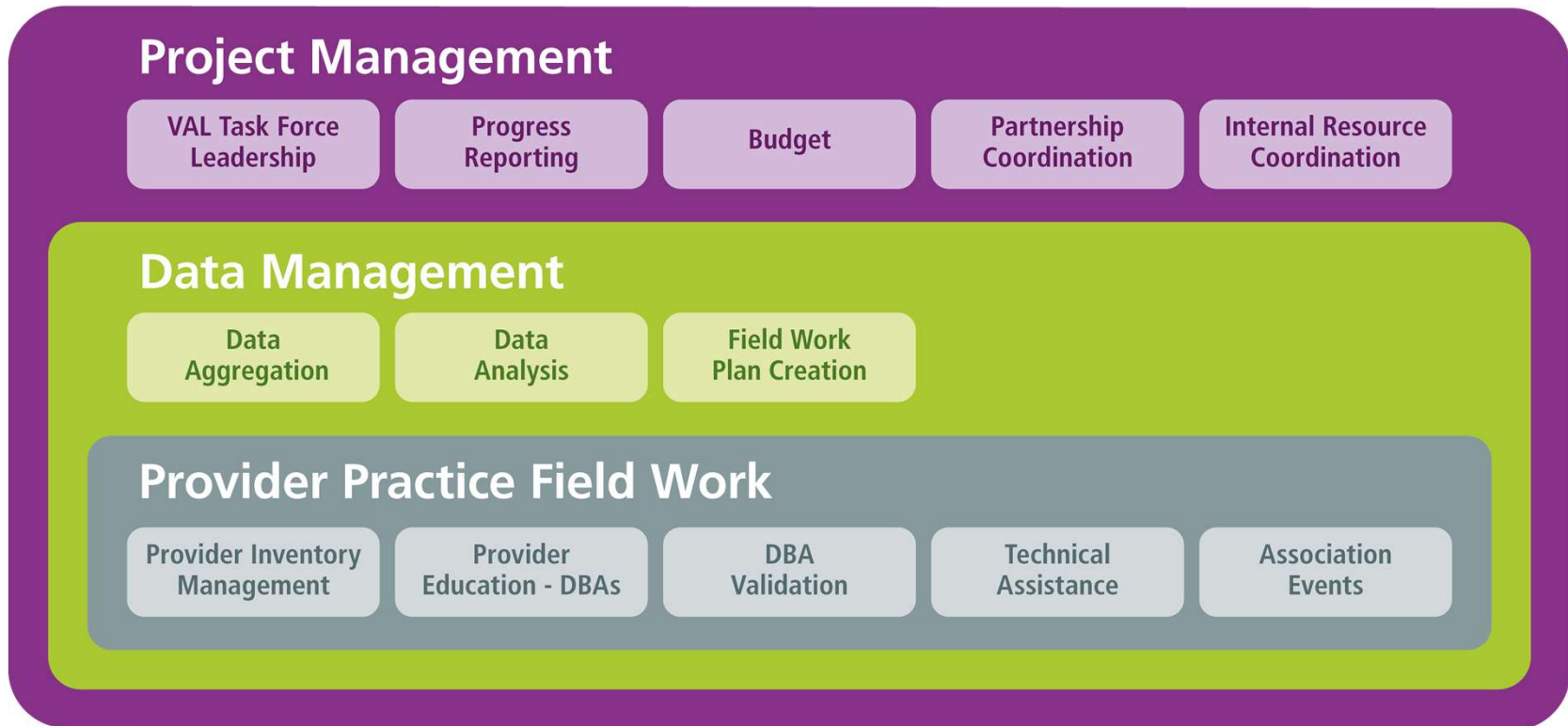
VAL Groundwork to Date

- » Hospital DBA Onboarding | Winter 2023-Fall 2024
- » Redesigned Provider Onboarding Process with WA DOH | Summer/Fall 2024
- » Submitted Two Data Sharing Agreement (DSA) Applications with WA DOH
 - 1ST Approved | February 2, 2025
 - 2ND in the Approval Process | Current
- » Hospital Reverification Process | January 2025-Present
- » Outreach to Key Partners | March 2025
 - WVA Vaccine Committee Members | WCAAP | WithinReach Washington



VAL Operational Plan Framework

VAL Reduction Project Goal: To reduce VAL by 50% by December 2025



Stay Connected

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