Partnering to Immunize Our Children and Families
TAPI: Public Private Partnership

- Governor’s Office of Women & Children
- Arizona Association of Community Health Centers
- Arizona Children’s Action Alliance
- Schaller Anderson
- Blue Cross Blue Shield
- Arizona Medical Association
- Arizona Health Care Cost Containment System
- Maricopa County Community Health Nursing
- Pima County Health Department
- Flinn Foundation
- BHHS Legacy
- Mercy Care
- Arizona Department of Health Services, Bio-Terrorism
- AHCCCS
- Scientific Technologies Corporation
- Phoenix Fire Department
- Arizona Academy of Pediatrics
- Health Logic
- Health Services Advisory Group

- Arizona Pharmacy Association
- Banner Health
- ASU College of Nursing
- Care 1st Health plan
- AZ State Division of Developmental Delays
- Health Links, Phoenix Day
- Arizona State Immunization Information System
- Arizona Family Practice Association
- Arizona Osteopathic Medical Association
- CIGNA Health Plan
- Phoenix Health Plan
- SCAN Health Plan
- Governor’s Council on Aging
- United Health Care
- Mesa Fire Department
- GlaxoSmithKline
- Sanofi Pasteur
- Medimmune
- Merck
- Novartis

Active Health Leadership working in trusted relationships
Private Sector Physicians Give Nearly 3/4 of Children’s Shots

Source: Arizona Department of Health Services
Making System Change

Arizona National Immunization Survey Results

Children 19 to 35 Months Old with 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hep B, and 1 Varicella

Healthy People 2020 Objective is 90%

Month and Year of NIS Data Release

*Please note: Hib vaccine shortage is reflected in the September 2010 coverage level for 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hep B and 1 Varicella.

Prepared by Arizona Immunization Program Office, Assessment Unit. Based on National Immunization Survey Data.

Working in partnership =

50% coverage level increase to 75% for babies
The Ultimate System Change...

What to expect with Affordable Care and vaccines...
Affordable Care Act...

• Plans must provide first dollar coverage for preventative services including vaccines.

• Pressure to decrease Federal spending so the funding can shift to new coverage.
  ▪ No federally funded vaccine to privately insured kids even at the health department
  ▪ VFC vaccine for underinsured kids at a community health center or deputized clinic.
Solutions: Vaccine Congress I, II & III...

Over 80 health organizations set recommendations to improve rates:

- Counties to bill for shots
- Increase reimbursement rates to private sector
- Train Providers on Business Practice

Arizona Vaccine Congress III
May 14, 2012
Agenda

8:00-9:00 Registration Continental Breakfast - Meet and Greet
9:00-9:10 Opening Session Welcome: Arturo Gonzalez, MD, FAAP, AzAAP President
9:10-9:20 Doug Campus Outcall, MD, ACIP (invited)
9:20-9:35 Vaccine Funding Changes in Public Health, Patty Gast, ADHS

Immunization/Vaccine Delivery System Overview
- 9:35-9:50 Vaccines in County Health Departments
  - Dr. Bob Englund (10 minutes)
- 9:50-10:00 Billing in Public Health/Physician Surveys
  - Jennifer Timney (10 minutes)
- 10:00-10:15 The Cost of Providing Vaccines in AZ Practices
  - Mike Perlstein, MD (15 minutes)
- 10:15-10:30 Vaccine Legislation 2012
  - Representative Nancy McClain and Representative Debbie McCune Davis

10:45-11:00 Summary of Gaps and Potential risks to AZ kids
- AD Jacobson, MD, TAPI President (15 minutes)
- 10:45-11:00 Setting the Stage for Proposed Solutions
- 11:00-11:15 Vaccine Association Proposal for Universal or Group Purchase State
  - David Childers, AHIP (15 minutes)
- 11:15-11:30 Immunization Coverage Goals for AHCCCS Health Plans (Assessment)
  - Marc Lib, MD (15 minutes)
- 11:30-11:45 HEDES Immunization Measures
  - Karrine Wrenz, AHIP (15 minutes)
- 11:45-12:00 Payment Initiatives with Vaccine Manufacturers
  - Phyllis Arthur, BIO (15 minutes)
- 12:00-12:30 Dialog on Proposals for Immunization Best Practice in Arizona
  - Panel Moderated by Will Humble, ADHS (30 minutes)
  - AHIP
  - AzAAP
  - BIO
  - AzMA
  - Health Officers
  - AHCCCS

Brief Questions and Answers During Each Segment
12:30-2:00 Lunch with Round Table Discussion
- Proposed Immunization Funding Solutions
- Avoiding Potential Gaps in Immunization Coverage

2:00-2:30 Recap and Action Items
2:30-3:00 Closing Remarks
Tell the Story with Data...

In Arizona, like much of the country, we have a broken vaccine system

- private sector payments are inadequate to cover cost
- public health funding cuts prevent some from getting shots

Need Measurable outcomes tied to economics
AZ Public Health has Gaps...

- $0 in state funding to health depts for immunizations
- Statute requires counties provide immunizations at no cost
- Insured kids Cost County Health $1.79 million per year (public price)
- Average LHD funding per person = $34
  Maricopa = $3.50 (4 million residents)
Cost of Vaccination...

Cost to Vaccinate One Child with Vaccines Universally Recommended from Birth Through 18 Years of Age: 1990, 2000, and 2011

2011 represents minimum cost to vaccinate a child (birth through 18), exception is no preservative influenza vaccine, which is included for children 6-47 months of age.
HPV excluded for boys because it is not routinely recommended by the ACIP.
Federal contract prices as of February 1, 1990, September 27, 2000, and April 1, 2011.
Problem: Rising Cost of Vaccines

• 44% percent of private practice overhead in vaccine stock

• Offices need to be paid 120% of retail cost to cover the expenses

Cost calculators developed by AzAAP
Private Physicians

Some potential problems...

1st Dollar Coverage does not mean adequate payment to providers
Local Profit/Loss on Vaccine Acquisition:

• Profit
  – 2 of 10 Practices
  – Range: $28 - $37 per child

• Loss
  – 8 of 10 Practices
  – Range: $10 - $227 per child

• There are 6 health plans with which every practice loses money

Source: AzAAP
Insurance Payments vs. Vaccine Cost

Net Yield: Insurance payment minus vaccine purchase price in dollars

Each bar = payment for one vaccine

Legend:
- Green max yield
- Blue average yield
- Red min yield

Payments below cost

Adapted from Gary Freed et al. *Pediatrics* 2008; 122:1325–1331
What is Takes to Give a Shot...

Contract with all health plans
  Credential site and all providers
Contract with vaccine suppliers
  Order and pay for private vaccine supply
  Sign up for VFC
  Sign up for ASIIS
Order VFC vaccine through state registry ASIIS
Accept shipment for vaccine/maintain cold chain
Refrigerate vaccine
Check refrigerator twice daily for temps
Insure vaccine
Schedule vaccine appointment
  Check insurance and VFC eligibility
Gather accurate and complete insurance data
Verify insurance coverage for private
Check the patient record book
  Check ASIIS for shot history
Screen patients for what’s needed and contraindications
  Council patient
Give VIS for every vaccine
Get parent signature on each vaccine
Draw up vaccine
Swab with alcohol
Inject vaccine
Band-Aid the site
Comfort the child
Give the child a sticker
Update the parent record book
Record correct diagnosis code to record
Record cpt to record
Record NDC and lot number to record
Update EHR
Report to ASIIS
Inventory vaccine stock in refrigerator
Report dose by lot number and NDC to ASIIS for VFC
Fax temp logs to VFC
Send record to billing
Build claim in electronic system all 33 boxes
Send claim to clearinghouse and on to payers
Receive EOB with payment or denial
Rebill 15% of claims for denial
Adjust actual payment in billing system
Report payment to patient
Record in billing system
Bill patient directly for outstanding balance
What is takes to Give a Shots
Very Boring Pie Chart?

County data also shows more than double number of insured kids in PH
So the Private Doctors Send Kids to Counties...

Percent of Children at Maricopa County Public Health Immunization Clinics who are Insured
### AHCCCS Performance Standards for Childhood Immunizations 2011

<table>
<thead>
<tr>
<th></th>
<th>DTaP (4 doses)</th>
<th>IPV (3 doses)</th>
<th>MMR (1 dose)</th>
<th>Hib** (3 doses)</th>
<th>HBV (3 doses)</th>
<th>VZV (1 dose)</th>
<th>PCV (4 doses)</th>
<th>4:3:1:3:3:1 Combo</th>
<th>4:3:1:3:3:1:4 Combo</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHCCCS/ Healthy People 2020 Goals (%)</td>
<td>90</td>
<td>90</td>
<td>90</td>
<td>90</td>
<td>90</td>
<td>90</td>
<td>90</td>
<td>80</td>
<td>80</td>
</tr>
<tr>
<td>Current AHCCCS Rate (%)</td>
<td>79.5</td>
<td>91.4*</td>
<td>91.3*</td>
<td>91.5*</td>
<td>87.9</td>
<td>90.5*</td>
<td>79.9</td>
<td>72.9</td>
<td>69.1</td>
</tr>
<tr>
<td>Previous AHCCCS Rate (%)</td>
<td>84.8</td>
<td>93.4</td>
<td>94.9</td>
<td>n/a</td>
<td>94.0</td>
<td>94.0</td>
<td>83.2</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>Statistical Significance of Change</td>
<td>p&lt;0.001</td>
<td>p&lt;0.001</td>
<td>p&lt;0.001</td>
<td>n/a</td>
<td>p&lt;0.001</td>
<td>p&lt;0.001</td>
<td>p=0.002</td>
<td>n/a</td>
<td>n/a</td>
</tr>
</tbody>
</table>

* Indicates the current rates that meet or surpass the AHCCCS/Healthy People 2020 goal.

** Hib dosage requirements changed to three doses by age 2; the previous measure included two doses by age 2. Due to this change, the rates are not comparable.

Performance Measures for HEDIS were going down
Personal Belief Exemptions - Kinder

Exemption rates were up doubled in 10 years
Appeal the Plans: Public and Private

Increase private provider rates to 120% of retail

Reimburse the public health departments for vaccine given to privately insured patients
ACA - Public Health Billing Systems

Don’t Forget Your Insurance Card!

Help keep PUBLIC HEALTH strong by following these 4 easy steps:

- Please bring your insurance card and immunization record to each county health immunization clinic visit.
- Please provide your insurance card to Public Health so your insurance company can be billed for your child’s vaccines.
- Talk to a Public Health Nurse about your visit today, your insurance coverage or where to find a doctor.
- If your child is Native American or is uninsured, they can receive vaccines at no cost through the Vaccines for Children Program (VFC).

Thank you for doing your part to keep our community healthy and strong.

LOCATE a doctor VISIT StopTheSpreadAZ.org CALL 211
Contracted Private Plans cover 70%

- Blue Cross Blue Shield of AZ
- United Health Care
- CIGNA
- Aetna
- Humana
- Health Net

- All Medicaid Plans 100% under age 18
Billing for Public Health....

- Does ACA help in Arizona?
  - Still seeing high deductibles and copays
- 80% small business
- 65% of commercially insured in Self Insured Plan

### Managed Market Surveyor — State Profile

**Arizona (January 2012)**

<table>
<thead>
<tr>
<th>Category</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arizona Population</td>
<td>6,482,505</td>
</tr>
<tr>
<td>Commercial Enrollment</td>
<td>3,230,826</td>
</tr>
<tr>
<td>PPO Commercial (Fully Insured)</td>
<td>748,443</td>
</tr>
<tr>
<td>HMO Commercial (Fully Insured)</td>
<td>146,023</td>
</tr>
<tr>
<td>Point of Service (POS) (Fully Insured)</td>
<td>212,953</td>
</tr>
<tr>
<td>Employer Sponsored/Self Insured/ASO(1)</td>
<td>2,123,407</td>
</tr>
<tr>
<td>Medicaid Beneficiaries(2)</td>
<td>1,199,793</td>
</tr>
<tr>
<td>MCO Managed Medicaid</td>
<td>1,102,962</td>
</tr>
<tr>
<td>State Medicaid (Fee for Service / PCCM)</td>
<td>95,831</td>
</tr>
<tr>
<td>Medicare Eligibles(3)</td>
<td>973,543</td>
</tr>
<tr>
<td>Fee For Service (Parts A/B)</td>
<td>609,418</td>
</tr>
<tr>
<td>Medicare Advantage (MA-PDP)</td>
<td>364,125</td>
</tr>
<tr>
<td>Dual Eligible Population</td>
<td>123,460</td>
</tr>
<tr>
<td>Estimated Total With Coverage(4)</td>
<td>5,279,702</td>
</tr>
<tr>
<td>Uninsured</td>
<td>1,202,803</td>
</tr>
</tbody>
</table>

65% of Arizona Insured through Employer Self Insured Plan

Grandfathered?
Public/Private Vaccine Business Model

- Oct - Jan Maricopa administered vaccine to privately insured kids at a cost of:
  \[202,849.43 \text{ payments} = 102,457.66\]

- Health Plan D took 18 months to correctly load health department into system

- Health plan E refused to contract with public health paid $2,800 on $35,000 vaccine bill
399 shots were not covered because of high deductibles at a cost of:
$22,155,18

They have to make that up through admin fees from other patients
### FY13 Vaccine Costs & Reimbursements Summary

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Used</th>
<th>Amt</th>
<th>Paid</th>
<th>Amt</th>
<th>Reimbursement Percentage of Cost</th>
<th>Percentage Paid of Amt Used</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dtap*</td>
<td>134</td>
<td>$2,122</td>
<td>92</td>
<td>$2,273</td>
<td>107%</td>
<td>69%</td>
</tr>
<tr>
<td>DT</td>
<td>0</td>
<td>-$</td>
<td>0</td>
<td>-$</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>TD</td>
<td>10</td>
<td>$196</td>
<td>5</td>
<td>$119</td>
<td>61%</td>
<td>50%</td>
</tr>
<tr>
<td>Tdap*</td>
<td>468</td>
<td>$15,070</td>
<td>435</td>
<td>$18,918</td>
<td>126%</td>
<td>93%</td>
</tr>
<tr>
<td>Hib*</td>
<td>126</td>
<td>$1,663</td>
<td>80</td>
<td>$2,096</td>
<td>126%</td>
<td>63%</td>
</tr>
<tr>
<td>IPV - Polio</td>
<td>123</td>
<td>$3,112</td>
<td>77</td>
<td>$2,285</td>
<td>73%</td>
<td>63%</td>
</tr>
<tr>
<td>MMR</td>
<td>305</td>
<td>$15,555</td>
<td>211</td>
<td>$12,286</td>
<td>79%</td>
<td>65%</td>
</tr>
<tr>
<td>HBV*</td>
<td>187</td>
<td>$2,008</td>
<td>88</td>
<td>$2,277</td>
<td>113%</td>
<td>47%</td>
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<tr>
<td>VZV</td>
<td>447</td>
<td>$37,999</td>
<td>295</td>
<td>$28,255</td>
<td>74%</td>
<td>66%</td>
</tr>
<tr>
<td>Hep A*</td>
<td>358</td>
<td>$6,049</td>
<td>266</td>
<td>$8,992</td>
<td>149%</td>
<td>74%</td>
</tr>
<tr>
<td>Flu Mist</td>
<td>0</td>
<td>-$</td>
<td>34</td>
<td>$731</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Flu 0.25*</td>
<td>187</td>
<td>$1,910</td>
<td>225</td>
<td>$2,294</td>
<td>120%</td>
<td>120%</td>
</tr>
<tr>
<td>Flu 0.50</td>
<td>921</td>
<td>$9,072</td>
<td>606</td>
<td>$7,500</td>
<td>83%</td>
<td>66%</td>
</tr>
<tr>
<td>PCV13</td>
<td>208</td>
<td>$24,544</td>
<td>129</td>
<td>$17,224</td>
<td>70%</td>
<td>62%</td>
</tr>
<tr>
<td>PPV23</td>
<td>0</td>
<td>-$</td>
<td>0</td>
<td>-$</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Pediarix</td>
<td>64</td>
<td>$3,974</td>
<td>39</td>
<td>$2,864</td>
<td>72%</td>
<td>61%</td>
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<tr>
<td>Pentacel</td>
<td>82</td>
<td>$6,281</td>
<td>47</td>
<td>$4,283</td>
<td>68%</td>
<td>57%</td>
</tr>
<tr>
<td>Kinrix</td>
<td>129</td>
<td>$5,366</td>
<td>105</td>
<td>$5,976</td>
<td>111%</td>
<td>81%</td>
</tr>
<tr>
<td>Menevo/N.</td>
<td>550</td>
<td>$52,998</td>
<td>505</td>
<td>$63,644</td>
<td>120%</td>
<td>92%</td>
</tr>
<tr>
<td>MMRV</td>
<td>1</td>
<td>-$</td>
<td>0</td>
<td>-$</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Rotavirus</td>
<td>83</td>
<td>$5,860</td>
<td>55</td>
<td>$4,420</td>
<td>75%</td>
<td>66%</td>
</tr>
<tr>
<td>HPV</td>
<td>437</td>
<td>$53,401</td>
<td>361</td>
<td>$52,410</td>
<td>98%</td>
<td>83%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>4,820</strong></td>
<td><strong>$247,181</strong></td>
<td><strong>3,655</strong></td>
<td><strong>$238,845</strong></td>
<td><strong>97%</strong></td>
<td><strong>76%</strong></td>
</tr>
</tbody>
</table>
Misplaced Safety Net?
Make the Correct Referral...

Available at WhyImmunize.org

Don’t Forget Your Insurance Card!

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- Please provide your insurance card to Public Health so your insurance company can be billed for your child’s vaccines.
- Talk to a Public Health Nurse about your visit today, your insurance coverage where to find a doctor.
- If your child is Native American or is uninsured, they can receive vaccines at no cost through the Vaccines for Children Program (VFC).

Thank you for doing your part to keep our community healthy and strong.
Legislative Proposals....

- Some plans stepped in with solutions

- Proposed Legislation HB2366
  - Require all health plans to reimburse 120% of vaccine cost – Passed as a Study Committee Bill

- Passed HB 2430- Requirement for health plans to reimburse county health departments as in network providers even without a contract
Centralized Billing Office

Total Income to Date
$4,474,924

- No child has been turned away
- No deductibles have been collected
- Counties are reimbursed about 10% above cost
- Partners work together for sustainable solutions
- Bill 136 plans per month; receive payment from 125
Jennifer Tinney
Patty Gast

480.580.3584 mobile
jennifert@tapi.org
pattyg@tapi.org

WhyImmunize.org