

The Role of Health Plans and Employers in COVID Vaccine Distribution

Lunch and Learn Webinar
December 17, 2020



Strategic Consulting at the Intersection of
Health Care Policy, Politics and Business



Agenda



Welcome and Introductions

Presentations

Jeff Wu, Acting Director, Center for Consumer Information and Insurance Oversight, CMS

Paul Eiting, Director of Value-Based Policy, Blue Cross Blue Shield Association

James Gelfand, Senior Vice President, Health Policy, ERISA Industry Committee (ERIC)

Q&A

Jeff Wu

Acting Director, Center for
Consumer Information and
Insurance Oversight, Centers
for Medicare and Medicaid
Services (CMS)



BCBSA: COVID-19 Vaccine Distribution

December 17, 2020

Paul Eiting, Director of Value-based Policy, Office of Policy and Representation



**BlueCross
BlueShield**
Association

Blue Cross Blue Shield Association is an association of independent Blue Cross and Blue Shield companies.

BCBSA COVID-19 Vaccine Principles

Vaccine Coverage Statement: Blue Plans will do our part to cover the cost of vaccination, with no cost sharing to members in accordance with federal laws and regulations

Principle	Detail
Trust through Transparency	<ul style="list-style-type: none"> • Call for open and transparent processes for the vaccines’ authorization, approval, allocation and distribution
Affordable Pricing	<ul style="list-style-type: none"> • Call for vaccine pricing that is affordable and reflects the taxpayer investment of the Operation Warp Speed public-private partnership
Surveillance for Safety and Efficacy	<ul style="list-style-type: none"> • Call for robust post-market monitoring and oversight of any authorized or approved products given the speed of vaccine development
Purposeful Prioritization	<ul style="list-style-type: none"> • Support broad and equitable allocation and distribution strategies that prioritizes persons with a high risk for contracting COVID-19, follows ACIP recommendations for receiving a vaccine at appropriate sites of care and encourages clear and consistent distribution guidance from the Administration to the states
Address Racial and Ethnic Disparities	<ul style="list-style-type: none"> • Support prioritizing vaccine access to target groups to reduce racial and ethnic disparities, including providing zero-dollar cost-sharing for the vaccination and free access for the uninsured
Communication Campaign	<ul style="list-style-type: none"> • Support federal and state public communication and outreach efforts to build public trust and address vaccine hesitancy

Vaccine on the Ground: Operational Considerations and Collaborations

- Coding – Ensuring No Back-End Barriers
- Receipt of Vaccine Claims
- Claims from Non-traditional Sites of Care / Roster Billing
- Collaborations with State Departments of Health and State Vaccine Allocation Plans
- Blue Plan Outreach and Communication to Members, Providers

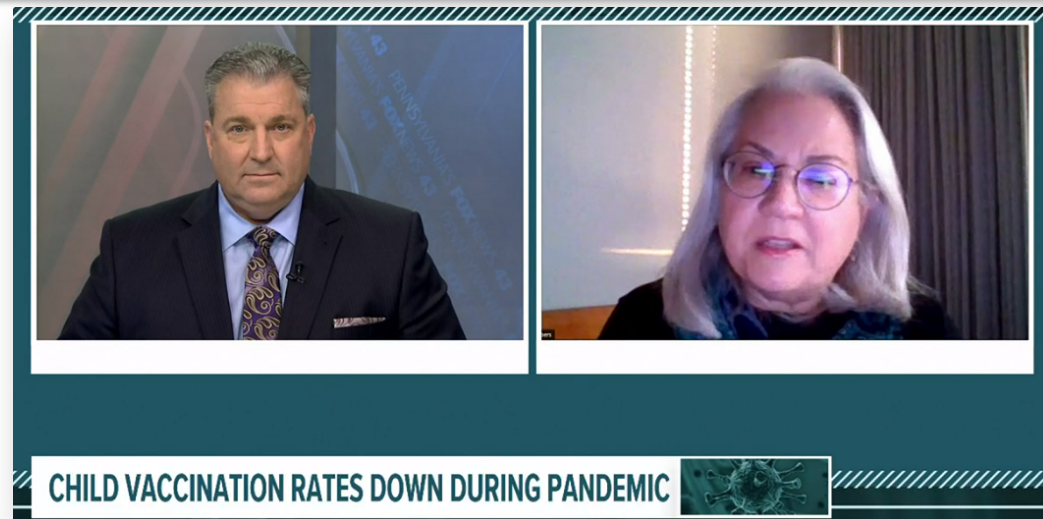
Plan Spotlight – Capital BlueCross



- Launched an earned media campaign analyzing the **decreased claims towards childhood vaccinations**
- Capital BlueCross' **CMO spoke on several mediums** (e.g., online news media, PBS radio, local news broadcasts) to discuss their analysis and importance of continuing childhood vaccinations despite the pandemic
- Additional focus towards educating providers and members on the importance of the **pneumococcal vaccine**

Capital BlueCross' childhood immunization claims from January through September show:

- DTaP vaccinations (diphtheria, tetanus and pertussis) dropped 18% from 2019, representing about 13,500 missed immunizations.
- MMR vaccinations (measles, mumps and rubella) fell 24% from last year, representing nearly 3,000 missed immunizations.
- Vaccinations for polio declined 26% from last year, representing more than 500 missed immunizations.



Plan Spotlight – BCBS Alabama



BlueCross BlueShield
of Alabama

- Distributed a **media release statewide** on the importance of the flu vaccine this Fall due to COVID-19
- Target general membership and seniors through **social media posts**
- Received **earned television coverage** on CBS 42 in Birmingham and WDHN ABC in Dothan, Alabama
- Produced **videos** on The Importance of the Flu Vaccine, The Importance of Childhood Vaccines, and HPV

 Blue Cross and Blue Shield of Alabama
November 12 at 1:00 PM · 🌐

Be sure to get your flu shot this year. Remember, it takes about two weeks after vaccination for you to form antibodies. The sooner you get it, the better! Learn more here: <https://bit.ly/3kqVV5c>



FLU SHOT FACT:
It takes two weeks to form antibodies after you get your flu shot.

 **SCHEDULE YOURS TODAY!**

 BlueCross BlueShield of Alabama

 Blue Cross and Blue Shield of Alabama
November 4 · 🌐

Seniors! Be aware that this year there is a flu shot for people over 65. Talk to your doctor about which flu shot is right for you this year. Learn more about flu shots here: <https://bit.ly/2Gya6Yo>



 **SENIORS,**
ask your doctor which **FLU SHOT** you need.

 BlueCross BlueShield of Alabama



ROBERT SMITH JR. **DR. ANNE SCHMIDT**

BLUE CROSS BLUE SHIELD
ENCOURAGES ALABAMIANS TO GET FLU SHOT

Many Plans are committing resources towards deployment and expanding access for a COVID-19 vaccine

Key BCBS Plan Distribution Actions

- Working closely with their state governments and community partners to **coordinate messaging** on the importance of a vaccine, vaccine facts and myths, and vaccine rollout plans
- Providing **mobile vans** to facilitate distribution, with an emphasis on targeting **vulnerable and underserved communities**
- Encouraging providers to **actively promote vaccinations** to their patient population
- Partnering with **local universities** and **urgent care facilities** to distribute and administer vaccinations
- Offering **clinical resources** to state officials and **physical office space** for vaccine administration

Additionally, Plans will be conducting their own vaccine education campaigns in the coming weeks and months that will target both their members and the community at large

ERIC

*Shaping benefit policies
before they shape you.*

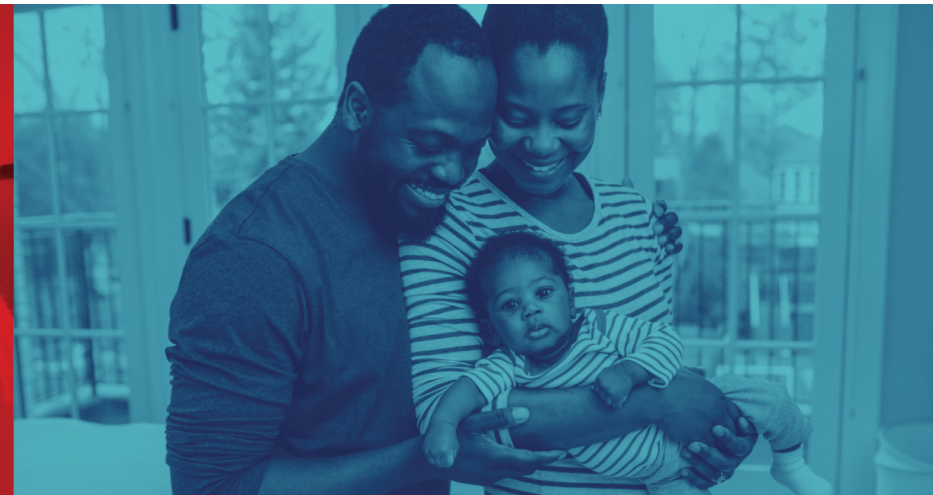
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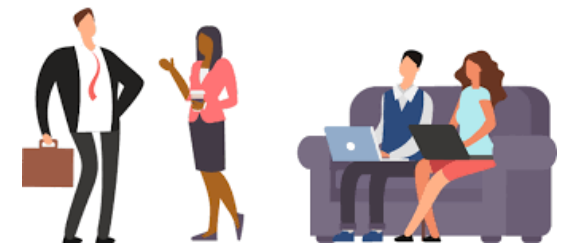
The ERISA Industry Committee

James Gelfand, Senior Vice President of Health Policy



Employers' Role in Vaccine Distribution

- Most ERIC members will “encourage” their employees to get the vaccine
- Can’t force the employees, most of the time (EEOC rules)
- Not clear what kind of encouragement is allowed
 - *De minimus* rewards?
 - “Inducements” under ACA – insurance premium variation?
 - Bonus money in CDHP account?
- Exception: Employers on the “front line” – 1a, etc.



Which Employees Get the Vaccines First?

- Health care workers (1a)
- Essential workers (1b)
 - Food and agriculture
 - Manufacturing and Communication
 - Transportation
 - Energy and Utilities
 - Education, 1st Responders
- Vulnerable population (1c)
- So what does this mean for diversified companies? Certain employees will have priority based on their **responsibilities**, and this will vary further by their **location**!



States will take the lead – confusing for national employers!

How Will Employers Get Vaccines to Employees?

- Some have existing partnerships with providers, clinics, pharmacies, or health systems.
 - Onsite employee health centers are equipped to administer, maybe not to store
 - Direct contracts with some health systems == Preexisting relationship to leverage
 - Large pharmacy chains on the forefront, potential to “bulk purchase”
- Others will be looking to make new relationships
- Vaccines maybe not available for another 6 months – need to plan now
- In the meantime, potential educational efforts, infrastructure focus

How Can TPAs, Carriers, and Others Meet Employers' Needs?



- Employers are looking for advice on leveraging their existing infrastructure, relationships, and personnel
- Many HR departments remain short-staffed, new responsibilities under COVID, lack excess capacity to develop plans, meet compliance challenges for vaccine distribution
- EVERYONE is looking to benchmark. What are my peers doing? How can I be proactive? How can my company show employees that we are taking action?
- There is trepidation about costs, compliance, and employee backlash. Can you help?

Can Employers Become Distribution Centers?

- Some employers with very concentrated workplace populations are looking into creating new infrastructure – onsite clinics, etc.
- They are interested in offering vaccines to populations beyond their beneficiaries – but are hesitant to create new ERISA plans, worried about ACA rules, liability



State Vaccine Distribution Priorities Will Determine Strategy

- **Florida** - Frontline health care workers, nursing home residents, people over 65, and those with significant health conditions
- **Kentucky** – Grade schoolteachers, first responders, and adults with significant illnesses
- **Virginia** – Health care workers, long-term care facilities, critical infrastructure staff, adults with high-risk medical conditions, and adults ages 65 and older
- **California** – SNFs, assisted living facilities, long-term care facilities, health care workers that come in direct contact with COVID patients, other health care workers (primary care, dental offices, labs), then “essential workers” farm laborers, police, childcare staff, teachers, minority communities
- **Arizona** – paid and unpaid persons in health care settings, “essential workers”, those 65 and older, those immune compromised

State Vaccine Distribution Reality Could Challenge Employers

- Government says we will have enough doses next summer, but will we?
- Tiering systems
 - Some states — including **Mississippi** and **New York** — have instructed hospitals to devise tiering systems to determine which employees should receive the first vaccinations
- Differing state priorities make it very challenging to develop a comprehensive plan for a national employer



Employers May Have a Role to Play in Perception Gap

- About 60 percent of Americans say they would get the shot, according to a November Gallup poll
- **Only 48 percent of non-white adults said they would be vaccinated**
- A “rushed timeline” is the reason that 40 percent of the U.S. public do not want a vaccine
- **Like it or not, this has been politicized**
- Employers may be a trusted intermediary who can help reach and convince certain populations



Conclusion: Employers are Hopeful, Want to Contribute to Solution



- Private sector led the way on vaccine development. Now we want to be part of the distribution effort.
- Government have been great partners. Recent regulation includes **CRITICAL PROTECTIONS** to prevent crooked providers from ripping off patients/payers.
- Employees want to return to their normal lives. Employers want to reopen the economy. The faster we can get everyone vaccinated, the sooner this will happen.
- **So what can be done to speed up the timeline? How can we be productive, not needy? Employers want to contribute in a meaningful way, not be seen as overly self-interested.**

ERIC

— THE ERISA —
INDUSTRY COMMITTEE

Shaping benefit policies before they shape you.

*Contact
Information*

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Q&A



Thank You!

Questions?

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