

Insurance and Real Estate Committee

MEETING MINUTES

Friday, October 4, 2024

12:00 PM in Room 1E of the LOB and Zoom and YouTube Live

The meeting was called to order at 10:05 AM by Chairwoman, Representative Wood.

The following committee members were present:

Rep. Wood, Sen. Osten, Rep. Walker, Rep. Nuccio, Rep. Pavalock-D'amato, Susan Halpin, Jim Carson, Eric George, Wyatt Bosworth

Absent were:

Sen. Cabrera, Sen. Hwang, Sen. Berthel

Chairwoman Wood convened the meeting at 10:05 AM with brief opening remarks. She then introduced the meeting's presenters from the Department of Public Health (DPH): Dr. Jodi Terranova, Deputy Commissioner, and Judy Dowd from the Office of Policy Management (OPM) and DPH.

Dr. Jodi Terranova began her presentation by providing an overview of Connecticut's Vaccine Program, which is primarily funded through the Vaccine for Children program and Connecticut's Immunization Fund. She explained that Connecticut is one of 11 universal vaccine states, offering all childhood vaccines at no cost to patients or providers. Dr. Terranova then shared the historical context, noting that the Vaccine for Children Act was passed in 1993 in response to the 1989-1991 measles epidemic, ensuring that vaccines are provided at no cost to children who are Medicaid-eligible or uninsured. She also explained that Connecticut's immunization fund was restructured in 2014 through Public Act 14-217, which shifted the program's financial responsibility to the Insurance Fund, ensuring long-term sustainability.

Dr. Terranova highlighted that Connecticut consistently ranks above the national average in vaccine coverage, with a current vaccination rate of 97% for kindergarten-aged children. She added that the Immunization Fund saves insurance companies approximately \$23 million annually by purchasing vaccines at federal contract prices, which are significantly lower than commercial market prices.

In terms of budget and funding, Dr. Terranova outlined that the immunization fund budget for FY 2025 is projected at \$55 million, noting that a surplus of vaccines acquired during the pandemic will allow the fund to lapse around \$15 million. She also clarified the staffing involved in administering the program, which includes three staff members funded through the Insurance Fund responsible for vaccine orders, quality assurance, and site visits. Other staff, responsible for monitoring storage and administration compliance, are funded through federal contracts.

During the discussion, several members raised questions about the fiscal and operational aspects of the immunization fund. Representative Nuccio inquired whether state employees contribute to the immunization fund or if their health plans are exempt from the assessment. She also asked whether the Federal Government covers the cost of vaccinations for Medicaid-eligible children and other specific populations, such as Native Americans and Alaskans, which Dr. Terranova confirmed. Rep. Nuccio also raised concerns about the impact of the surplus inventory of vaccines from previous years, asking if insurance companies receive any credit or refunds for assessments paid during years when the surplus is large. Dr. Terranova clarified that the surplus is considered when planning the following year's budget, and adjustments are made to future assessments accordingly, but there is no direct refund mechanism.

Another significant point of discussion was raised by Representative Walker, who requested detailed documentation regarding the vaccines covered under the fund and their associated costs. She also asked about the administrative costs and how much funding is allocated for other public health programs, such as tuberculosis and sexually transmitted infections, which are also supported by the immunization fund. Dr. Terranova explained that these programs are mandated by the same statute that governs the immunization fund, and DPH uses these dollars to provide necessary medications to local health departments and other providers.

Rep. Nuccio posed additional questions regarding whether all insurance companies and plans, including state employee health plans, are required to pay the immunization assessment. She raised concerns about the potential for inequity if certain plans or self-insured groups are exempt from the assessment, while others are not. Dr. Terranova and Judy Dowd agreed to follow up in writing to clarify which plans are subject to the immunization fund assessments.

Eric George asked for more information on how insurance companies save money through the immunization fund. He requested clarification on whether only insurance companies that offer vaccination coverage are assessed for the fund or if all companies, regardless of the services they provide, are required to contribute. Judy Dowd explained that insurers benefit from bulk purchasing of vaccines, which leads to significant cost savings, and agreed to provide more information on the assessment criteria for insurance companies.

Several other members asked questions about the state's vaccine purchasing process. Rep. Walker asked how vaccines are stored and delivered, and whether doctors are allowed to purchase vaccines separately. Dr. Terranova explained that vaccines are stored by the vendor McKesson, which also manages distribution. She emphasized that under current statutes, providers are required to purchase vaccines through the state's program rather than sourcing them independently. Rep. Walker also raised concerns about the accuracy of vaccination rates, particularly in homeschool populations, and asked whether the state has any data on vaccination rates for children who are

homeschooled. Dr. Terranova acknowledged the difficulty in tracking this group and mentioned that improvements to the immunization registry system might provide more robust data in the future.

Wyatt Bosworth raised broader questions about the effectiveness of the current funding model, asking if the state had considered shifting funding for the immunization program from the Insurance Fund to the General Fund during times of economic surplus. He also asked whether Connecticut's approach is unique compared to other states and whether there are challenges in collecting assessments from third-party administrators (TPAs) and self-insured plans. Dr. Terranova and OPM agreed to provide additional information on how Connecticut's immunization fund compares to other states and whether TPA compliance is an issue.

In response to these inquiries, DPH committed to providing follow-up documentation on vaccine costs, the breakdown of the immunization fund budget, and further clarification on which insurance plans contribute to the immunization assessments.

Chairwoman Wood concluded the meeting by thanking the presenters and participants for their insights. She noted that follow-up documentation, including the vaccine cost list, would be provided to all members. It was announced that the date of the next meeting will be November 13th at 11:00 AM

A motion was duly made and seconded to adjourn the meeting.

The meeting was adjourned at 1:02 PM.

Taylor Aitken
Committee Clerk