

# AGENDA Board Meeting January 13, 2021, 9:00 am – 10:30 am Via Webinar

#### To register for the meeting:

https://us02web.zoom.us/webinar/register/WN\_i0-SAPVgSem2MNdIGj\_5LQ

An individualized link will be sent to you upon registration

	Agenda Item
1.	Welcome & Roll Call (S. Tenney)
	Recording announcement
2.	Review and Acceptance of Minutes (S. Tenney)
	a. November 18, 2020 Board Meeting Minutes* – <b>VOTE</b>
3.	Executive Director Update (P. Miller)
	a. LSR 2021-0158*
	b. FYTD Financials*
	c. Assessment Trends*
4.	Department of Health and Human Services Update (B. Daly)
5.	Other Business
6.	Public Comment
7.	Executive Session – Board Attendance Only
	Separate Zoom link to access emailed to Board members
8.	Adjournment
	<ol> <li>3.</li> <li>4.</li> <li>6.</li> <li>7.</li> </ol>

<sup>\* =</sup> supporting document attached

#### NEW HAMPSHIRE VACCINE ASSOCIATION

#### **Board Chair Statement re: Public Commentary During Meetings**

I welcome members of the public and ask that each of you sign the attendance sheet or announce yourself if you are participating by telephone. Please also inform the Board now if you will be recording this meeting.

If the Board has sufficient time to conduct its business, then it is our policy to reserve time later in the meeting for public commentary. This commentary should be limited to matters that are germane to the role of the NH Vaccine Association: namely, the assertion and collection of assessments to fund the non-federal portion of the State's purchase and distribution of vaccines under the federal Vaccines for Children program. The Vaccine Association is not a policy-setting organization, it has no influence over the State's participation in the Vaccines for Children Program, and its role is not to challenge the vaccine program cost estimates provided by the State absent obvious error. Therefore, as Chair of the Board, I reserve the right to interrupt and end any pubic commentary that is not germane to the business of this Association.

Lastly, I remind the public that the commentary period is not an interactive session. If you have questions for the Board or for its executive staff, please direct them to our Executive Director who will respond in the normal course of Association business.

Thank you in advance for adhering to these public commentary guidelines so that we may have a productive meeting.



1 DRAFT 2 **MINUTES** 3 **Board of Directors Meeting** 4 November 18, 2020 5 9:00 - 11:00 a.m. 6 Presiding Officer: Susan Tenney, Chair 7 8 A meeting of the of the Board of Directors of the New Hampshire Vaccine Association (NHVA) was held via Zoom 9 Webinar with a quorum present. 10 11 The meeting was called to order by Susan Tenney, Chair, at 9:05 a.m. 12 13 Welcome and Roll Call 1. 14 15 **Attendance** – The following individuals attended the meeting: 16 **Committee Members:** Other Attendees & Administrative Staff: Susan Tenney, HPHC, Chair Mark McCue, Esq., Hinckley Allen David Sky, NHID, Treasurer Patrick Miller, Helms & Company, Inc. Sean Lyons, Cigna, Secretary Erin Meagher, Helms & Company, Inc. Keith Nix, Helms & Company, Inc. Elizabeth Daly, NH DHHS Patricia Edwards, MD, Healthcare Provider Members of the Public: Jason Margus, Anthem Laura Condon, Bedford Wendy Lee Parker, Public Member Lorraine Radick, RPh, Public Member Jessica Kliskey, Stratham Janice Valmassoi, MD, Healthcare Provider **Excused Members:** Edward Moran, Public Member, Vice Chair 17 For development of the meeting minutes, Mr. Miller announced he was recording the meeting and will delete the 18 recording once the minutes are finalized. Roll call for attendance was then taken. 19 20 Ms. Tenney welcomed the Board Members, staff, and members of the public to the meeting. She proceeded to read 21 the Board Chair Statement Regarding Public Commentary During Meetings drafted by Attorney McCue. 22 23 2. Review and Acceptance of the September 23, 2020 Board Meeting Minutes 24 25 Ms. Tenney asked if there were any questions or comments related to the draft September 23, 2020 minutes. Mr. 26 Miller advised that a few corrections had been provided by Ms. Daly and Ms. Radick: 27 Line 80 – "buy" should be "by" and "unanimously" should be removed 28 Line 85 - Elizabeth Daly abstained 29 Line 90 – Wendy Lee Parker abstained 30 Line 129 - add "around" after "since" 31 Line 203 - "and" should be "an". 32 33 There being no additional comments, Ms. Tenney asked for a motion. 34

On a motion by Mr. Lyons, seconded by Ms. Radick, by roll call it was

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**VOTE RECORDED:** 



**VOTED:** To accept the September 23, 2020 Board Meeting minutes with edits as listed above.
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	<u>Yes</u>	<u>No</u>	
Elizabeth Daly	X		
Patricia Edwards, MD			No vote
Sean Lyons	Χ		
Jason Margus	X		
Wendy Lee Parker	X		
Lorraine Radick, RPh	X		
David Sky	X		
Susan Tenney	X		
Janice Valmassoi, MD	Χ		

A vote was not recorded for Dr. Edwards.

#### 3. Review and Acceptance of the FY2020 Audit Report

Ms. Tenney asked Mr. Sky to lead the discussion. Mr. Sky, Chair of the Audit Committee, stated that on September 9, 2020, the Committee met with NHVA's auditor Karen Carew of Carew & Wells, PLLC where she presented the fiscal year 2020 audit findings and financial statements to the Audit Committee. The Committee was pleased with the presentation and recommended that the Board of Directors approve the report. Mr. Sky added that the Committee thought Crew & Wells did a very good job.

Ms. Tenney asked the Board members if there were any questions or discussion regarding the report. Hearing none, Ms. Tenney asked for a motion.

**VOTE RECORDED:** On a motion by Ms. Parker, seconded by Ms. Daly, by roll call it was unanimously **VOTED:** To approve the FY2020 Audit Report.

	<u>Yes</u>	No
Elizabeth Daly	X	
Patricia Edwards, MD	X	
Sean Lyons	X	
Jason Margus	Χ	
Wendy Lee Parker	Χ	
Lorraine Radick, RPh	X	
David Sky	Χ	
Susan Tenney	Χ	
Janice Valmassoi, MD	Χ	

#### 4. Review and Acceptance of the FY2020 Annual Report

Ms. Tenney directed the group to page 23 of the meeting packet to review the Annual Report. Ms. Tenney asked Mr. Miller if he had any comments related to the report. Mr. Miller summarized the main points: the funding split was slightly more favorable to the payers this past year at 58.4%, and the administrative expenses dropped to less than one percent (.95%) which is notable. Mr. Miller extended a thank you to Ms. Daly and Ms. Haggerty for all the work they did in terms of providing data for the Annual Report. He noted the chart on page two of the report is new. It is not the immunization rates as shown in prior years, but it examines vaccine doses ordered and the impact of COVID-19. Several members of the Board expressed that this information is helpful and tells a story.



Ms. Tenney asked the Board if there were any additional comments or discussion. Hearing none, she called for a motion.

VOT

**VOTE RECORDED:** On a motion by Ms. Radick, seconded by Ms. Daly, by roll call it was unanimously **VOTED:** To accept and publish the FY2020 Annual Report.

	<u>Yes</u>	No
Elizabeth Daly	Χ	
Patricia Edwards, MD	Χ	
Sean Lyons	Χ	
Jason Margus	Χ	
Wendy Lee Parker	Χ	
Lorraine Radick, RPh	Χ	
David Sky	Χ	
Susan Tenney	Χ	
Janice Valmassoi. MD	X	

#### 5. Executive Director Report

Ms. Tenney asked Mr. Miller to provide the group with the Executive Director Report. Mr. Miller began by reviewing the draft 2021 Board of Directors Meeting and Audit Committee Meeting schedule. Most of the meetings will be held on Wednesdays and invitations for each meeting have been sent to the group. There were no questions or concerns.

Mr. Miller reviewed the unaudited financial statements as of October 31, 2020. Currently, NHVA is running ahead of budget on assessment income as well administrative expenses. Investment interest rates are falling short of expectations given the economic downturn and the available investments. We will continue to review this with the team at Bank of New Hampshire. The ICS account will continue to grow as other instruments are called. We retain a strong cash position as shown on the *Statement of Financial Position* with \$13.1M in checking and savings (ICS account) and short-term investments of \$4.7M for a total of approximately \$17.8M.

The *Statement of Changes in Net Assets* shows greater detail on NHVA expenses. NHVA is running ahead of budget on expenses primarily due to not having incurred legal fees.

Finally, Mr. Miller provided a brief update on the latest assessment collection due November 15, 2020. The final numbers are not known as one carrier still has not filed, however, we do know that the total lives will be down compared to the first two quarters of the year due to unemployment as a result of the pandemic. New Hampshire's unemployment numbers came out yesterday and have dropped to 4.2% with the US holding at 6.9%. We have now seen six months with downward rates since the high in April of 17.1%, however, 4.2% is notably more than the 2.4% seen prior to the pandemic. These numbers will continue to be monitored. Medicaid enrollment increased again last month for both the standard Medicaid and Medicaid expansion populations. Since February 2020, the standard Medicaid net increases for children 0-18 was 6,881 lives and for the Granite Advantage lives it was 12,951. These numbers will continue to be tracked as part of the next year's assessment rate planning.

Mr. Miller advised the group that Ms. Meagher is working to finalize the current assessment this week. A few carriers are still outstanding and multiple payments were postmarked right before the 15<sup>th</sup>. Any late assessment payments will be reported at our next meeting. Mr. Sky asked how the NHVA assessed lives compared to New Hampshire Health Plan. Mr. Miller stated that there is a meeting scheduled for tomorrow to discuss the covered lives between the two programs. Mr. Miller offered to provide a follow up email later in the week. Mr. Miller also offered to the



full Board an ongoing update that he currently provides to the Audit Committee relating to the unemployment rates and Medicaid enrollment numbers.

#### 6. Department of Health and Human Services Update

Ms. Tenney asked Ms. Daly for her update. Ms. Daly first provided an update on programmatic spending that included the funds that come from the Vaccine Association. To date in this fiscal year, DHHS has expended \$7,034,890.82. The CDC credit is drawn down first and then DHHS starts drawing upon the Association funds.

DHHS has been planning for the COVID-19 vaccine since spring. The COVID-19 plan for New Hampshire was submitted to the CDC in late October, and the document is available on the DHHS website. Two pharmaceutical companies have vaccines that are showing efficacy of 90%-95%. Both companies will be submitting Emergency Use Authorizations (EUA) to the FDA for approval and it will take about two weeks for FDA to review and make an approval decision. We could see some vaccine in New Hampshire by mid-December.

DHHS has a vaccine allocation strategy team that has worked on a distribution strategy for the vaccine due to having only a very limited amount of vaccine available initially. There is a phased plan to provide the vaccine to those at highest risk, such as healthcare workers, first responders, and long-term care facility residents. Later phases include essential workers, the general public with co-morbidities, and then the general public without co-morbidities. It is going to take many months to vaccinate everybody who wants to be vaccinated.

Ms. Daly indicated that related to the cost of the COVID-19 vaccine, it is anticipated that the cost will not affect NHVA at least initially. Initially, the Federal Government is expected to provide the vaccine at no cost as part of the pandemic response. If it becomes a routine vaccine at some point in the future, then it will likely be paid for as existing ones are.

CMS has issued a memo in terms of paying for the administration of the vaccine. Providers will be able to bill for the administration but not for the vaccine cost. Medicare and Medicaid will reimburse providers for the administration costs and commercial insurance carriers are being encouraged to follow suit. Providers are not allowed to bill people who are uninsured, and there is going to be a provider relief fund to support the costs for the uninsured.

Dr. Edwards asked where children fit in the strategy. Ms. Daly stated that children in general will be part of later phases. General discussion ensued including not knowing if the vaccine will be yearly like the flu shot or if it will work for a longer time frame. This will have potential impact too.

Ms. Daly stated that due to the ultra-cold storage requirements, DHHS will be receiving the vaccine and distributing it to providers within the state. It is anticipated the initial limited supply will be provided primarily to hospitals and to long term facilities. National contracts are in place for CVS and Walgreens to provide the vaccine to long term care facilities. After the first phase, especially as other vaccine formulations become available that do not require ultra-cold storage, the plan is to have the system work the same way that our childhood program works which is for providers to order vaccines and have shipped directly to their office.

Ms. Radick asked for confirmation that people age 65 and older will not necessarily be in the first wave if they are not in a health care facility or assisted living facility. Ms. Daly confirmed this is correct. Ms. Radick asked about cold storage requirements. Ms. Daly explained it is ultra-cold storage at negative 70 to 80 degrees Celsius, and that not even all the hospitals have refrigerators that can store at that temperature. The vaccine will be transported to the administration site on dry ice and then will need to be used within a specified period of time. It is anticipated by the time this vaccine is administered within physician offices, the formula for the vaccine will have evolved so the storage challenges will have been reduced.



Ms. Tenney asked Ms. Daly about the status of a vaccine tracking system. Ms. Daly indicated that DHHS is working on implementing a registry, which is expected to be up and running later in December. DHHS is looking at other options for tracking including hospital electronic medical record systems, but from an accountability perspective, the provider will have to report the data back to DHHS in terms of the doses being administered and the use of the vaccine.

Ms. Radick asked which manufacturer is producing the vaccine that only requires a single shot. Ms. Daly replied that she believes it is Johnson & Johnson but does not have that information with her today. Ms. Radick then asked where the legislation stands with expanding the vaccine program to adults. Ms. Daly advised that her office continues to receive questions from Rep. Knirk on how the child vaccine program works. It is unclear what his proposed legislation will entail, but the general understanding is that the legislation will be considered in the upcoming legislative session.

#### 7. Public Comment

Ms. Tenney opened the meeting to any members of the public that wished to speak. Ms. Condon was invited to provide comments. Ms. Condon thanked the group for the opportunity to speak and for public participation in the meeting. She expressed that she believes it is important for the public to have access to the meetings. Ms. Condon shared concerns regarding the thoroughness of her prior meeting comments in the minutes and that the audited financial statements are missing information. She began by stating she expressed concern at the last meeting with the reporting by the CDC and DHHS that vaccine use was down by some 30% to 60%. She then expressed concerns regarding the CDC credits in that the audited financial statements have not referenced these credits. She suggested that completion of an IRS form 990 would address this as well as Bank of New Hampshire's Wealth Management Group fees for investment management. Ms. Condon concluded her remarks by saying that the media's reporting this week of COVID-19 vaccine effectiveness does not mean that the vaccine prevents infection. She stated that it is important for the NH DHHS to provide greater clarity to the public regarding what "effectiveness" means. She then thanked the Board members for the opportunity to speak.

Ms. Tenney thanked Ms. Condon for participation in the meeting.

#### 8. Executive Session

Ms. Tenney asked for a motion to move into Executive Session.

 **VOTE RECORDED:** On a motion by Dr. Edwards, seconded by Ms. Daly, by roll call it was unanimously **VOTED:** To move to Executive Session at 9:40 a.m.

	<u>Yes</u>	No
Elizabeth Daly	Χ	
Patricia Edwards, MD	Χ	
Sean Lyons	Χ	
Jason Margus	Χ	
Wendy Lee Parker	Χ	
Lorraine Radick, RPh	Χ	
David Sky	Χ	
Susan Tenney	Χ	
Janice Valmassoi, MD	Χ	

Mr. Miller explained the current webinar will end and each board member will receive a new invitation with a sperate Zoom link to host the Executive Session.



9. Adjournment The meeting adjourned after the completion of the Executive Session. Board of Directors Meeting minutes respectfully submitted by Sean Lyons, Board Secretary November 24, 2020 

#### **Section 1 Header**

#### 2021 SESSION

21-0158.2 05/11

HOUSE BILL [bill number]

AN ACT expanding the New Hampshire vaccine association to include adult vaccines.

SPONSORS: [sponsors]

COMMITTEE: [committee]

#### **ANALYSIS**

This bill expands the New Hampshire vaccine association to include adult vaccines.

Explanation: Matter added to current law appears in **bold italics**.

Matter removed from current law appears [in brackets and struckthrough.]

Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

#### STATE OF NEW HAMPSHIRE

#### In the Year of Our Lord Two Thousand Twenty One

AN ACT expanding the New Hampshire vaccine association to include adult vaccines.

Be it Enacted by the Senate and House of Representatives in General Court convened:

- 1 New Hampshire Vaccine Association; Definitions. Amend RSA 126-Q:1, III and IV to read as follows:
- III. "Assessable lives" means:

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- (a) All children under 19 years of age residing in the state who have assessable coverage written or administered by an assessable entity, with the exception of children whose vaccines are paid for under the federal Vaccines for Children program, established under 42 U.S.C. section 1396s.
- (b) All adults, age 19 through 64, excluding Medicare beneficiaries, residing in the state who have assessable coverage written or administered by an assessable entity.
- IV. "Assessment" means the assessable entity's liability with respect to [ehildhood] vaccines determined in accordance with this chapter. *Unless preempted by federal law*, for purposes of rate setting and medical loss ratio calculations, all association assessments are considered pharmaceutical or medical benefit costs and not regulatory costs. In the event of any insolvency or similar proceeding affecting any payer, assessments shall be included in the highest priority of obligations to be paid by or on behalf of such payer.
- 2 New Hampshire Vaccine Association; Definitions. Amend RSA 126-Q:1, VIII to read as follows:
- VIII. "Estimated vaccine cost" means the estimated cost to the state over the course of a state fiscal year of the *ordering*, purchase, distribution, and [administration] administrative oversight of vaccines purchased at the federal discount rate by the department of health and human services.
  - 3 New Hampshire Vaccine Association; Definitions. Amend RSA 126-Q:1, XI to read as follows:
- XI. "Vaccine" means any preparations of killed microorganisms, living attenuated organisms, or living fully virulent organisms that are approved by the federal Food and Drug Administration and recommended by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention and have been authorized by the commissioner of the department of health and human services for administration to children *and adults* of the state of New Hampshire [under the age of 19 years] for the purposes of producing or artificially increasing immunity to particular life-threatening and disabling diseases.
- 4 New Hampshire Vaccine Association; Creation of Association. Amend RSA 126-Q:2 to read as follows:

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126-Q:2 Creation of Association. There is hereby created a nonprofit corporation to be known as the New Hampshire vaccine association. The association is formed to assess assessable entities for the cost of vaccines provided to certain children *and adults* in New Hampshire.

- 5 New Hampshire Vaccine Association; Membership, Powers, and Duties of the New Hampshire Association. Amend RSA 126-Q:3, V(m)-(o) to read as follows:
- (m) Collect assessments from assessable entities as calculated under RSA 126-Q:4 and deposit said assessments less the association's administrative costs annually and reserves with the state treasurer to the credit of the vaccine purchase fund established pursuant to RSA 141-C:17-a. At the written request of the association following a majority vote of the board of directors, any funds forwarded to the state treasurer for the vaccine purchase fund remaining unexpended for [childhood] vaccines, shall promptly be returned to the association.
- (n) Be authorized to enter into one or more agreements with other applicable authorities in surrounding states to reduce the risk of duplicate assessments and to assure availability of vaccines for children *and adults* who are residents of this state but who receive vaccination services in other states. Any costs relating to any such agreement shall be considered additional vaccine costs of the program for purposes of determining the association's assessments.
- (o) Adopt procedures by which affiliated assessable entities calculate their assessment on an aggregate basis and procedures to ensure that no assessable life is counted more than once. Unless otherwise determined by the board, the assessable entity responsible for the payment of the provider's administrative costs for [ehildhood] vaccines shall be the entity responsible for reporting assessable lives and payment of the corresponding assessment.
- 6 New Hampshire Vaccine Association; Assessment Determination. Amend RSA 126-Q:4, I to read as follows:
- I. The board shall determine an assessment for each assessable entity in accordance with this section, except that no assessment shall be made based on children excluded from assessable lives whose vaccines are paid for under the federal Vaccines for Children program, established under 42 U.S.C. section 1396s or adults whose vaccines are paid for under Medicare. Unless preempted by federal law, an assessment determination made pursuant to this section is a pharmaceutical cost and not a regulatory cost for purposes of calculating the carrier's medical loss ratio
- 7 New Hampshire Vaccine Association; Assessment Determination. Amend RSA 126-Q:4, V to read as follows:
- V. The board may determine an interim assessment for new vaccines or unanticipated shortfalls in the association's ability to meet [ehildhood] vaccine funding needs. The board shall calculate the interim assessment in accordance with paragraph II, and the interim assessment is payable the calendar quarter that begins no less than 30 days following the establishment of the

### Section 3 Header - Page 3 -

- federal contract price. The board shall not impose more than one interim assessment per year, except in the case of a public health emergency declared in accordance with state or federal law.
  - 8 New Hampshire Vaccine Association; Immunity from Liability. Amend RSA 126-Q:8 to read as follows:
- 5 126-Q:8 Immunity From Liability.

- I. There shall be no liability on the part of and no cause of action of any nature shall arise against any association member or its agents or employees, the association or its agents or employees, members of the board of directors, or the commissioner or the commissioner's representatives, for any action or omission by them in the performance of their powers and duties under this chapter.
- II. There shall be no liability on the part of and no cause of action of any nature shall arise against the state of New Hampshire, including the department of health and human services or its agents or employees, for any action or omission by the state in the performance of its powers and duties under this chapter.
- 9 New Hampshire Vaccine Association; Vaccine Purchase Fund. Amend RSA 141-C:17-a to read as follows:
- 141-C:17-a Vaccine Purchase Fund. There is hereby established a vaccine purchase fund for the *ordering*, purchase, *distribution*, *and administrative oversight* of antitoxins, serums, vaccines, and immunizing agents, which are to be provided to the public at no cost except for the actual cost of administering such agents, under RSA 141-C:17. Any funds provided to the department for this purpose and deposited in the fund shall not be used for any other purpose. Moneys in the fund shall be continually appropriated to the commissioner of the department of health and human services.
- 10 Effective Date. This act shall take effect July 1, 2022.

# NHVA Statement of Cash Flow YTD FY2021

Quarter Ended December, 31 2020

		FY21 - Q1 Actual	FY21 - Q2 Actual	FY21 - Q3 Actual	FY21 - Q4 Actual	FY 2021 YTD Actual	FY 2021 YTD Budget	Difference YTD Act to Bud	FY 2021 Annual Budget
Recei	ots (Source)								
	Assessment Income	3,341,697	3,328,287	-	-	6,669,984	6,184,285	485,699	12,059,485
	Assessment Income - TRICARE (Settlement)	103,217	116,651	-	-	219,868	201,630	18,238	401,145
*	Accounts Receivable	-	-	-	-	-	-	-	-
	Interest Income - Assessments	163	267	-	-	430	49	381	293
	Interest Income - Bank & Sweep (ICS)	13,007	15,039	-	-	28,046	29,339	(1,293)	58,679
	Interest Income - Investments	23,259	9,854	-	-	33,113	47,573	(14,460)	95,146
	Dividend Income	21	5	-	-	25	47	(21)	93
	Investment Advisory fees	(6,520)	(4,678)	-	-	(11,197)	(13,688)	2,490	(27,376)
	Unrecognized Gain or Loss	1,947	(3,553)	-	-	(1,606)	6,460	(8,067)	12,920
	Realized Gain or Loss	603	-	-	-	603	1,808	(1,205)	3,616
**	Investment - Short term and CDs	2,077,691	174,372	-		2,252,063		2,252,063	
		5,555,085	3,636,244	-	-	9,191,329	6,457,504	2,733,825	12,604,002
Disbu	rsements (Use)								
***	Expenses	32,752	29,675	-	-	62,427	74,825	(12,398)	9,736,857
*	Prepaids & Payables Change	(840)	(840)	-	-	(1,680)	-	(1,680)	-
	Vaccine Expenses	-	-	-	-	-	-	-	-
		31,912	28,835	-	-	60,747	74,825	(14,078)	9,736,857
	Increase (Decrease)	5,523,172	3,607,410	-	-	9,130,582	6,382,679	2,747,903	2,867,146
	Cash Balance - Beginning Cash Balance - Ending	7,514,560 13,037,732	13,037,732 16,645,141	- -	- -	7,514,560 16,645,141	7,514,560 13,897,238	- 2,747,903	7,514,560 10,381,705

#### Notes:

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<sup>\*</sup> Changes in Balance Sheet accounts are denoted as () = Increases and positive = decrease

<sup>\*\*</sup> The positive number represents amounts transferred back to the ICS account from the Short Term Investments (CDs)

<sup>\*\*\*</sup> Budgeted expense includes annual State of NH payment due June 2021

## NHVA Statement of Financial Position

YTD FY2021 Quarter Ended December 31, 2020

		Jun 30, 20		Sep 30, 20		Dec 31,20	Ma	r 31, 21	Jun	30, 21	
ASSETS		FYE 20		FY21 - Q1		FY21 - Q2	FY	21 - Q3	FY21 - Q4		
Current Assets	Audited			Interim		Interim	In	iterim	Audited		
Checking/Savings											
Bank of NH #851031104	\$	50,000	\$	49,925	\$	50,000	\$	-	\$	-	
Bank of NH - ICS	\$	7,464,560	\$	12,987,807	\$	16,595,141	\$	-	\$	-	
Total Checking/Savings	\$	7,514,560	\$	13,037,732	\$	16,645,141	\$	-	\$	-	
Accounts Receivable											
Accounts Receivable (A/R)	\$	-	\$	-	\$	-	\$	-	\$	-	
Allowance for Account Receivable	\$	-	\$	-	\$	-	\$	-	\$	-	
Total Accounts Receivable	\$	-	\$	-	\$	-	\$	-	\$	-	
Other Current Assets											
Prepaid Expenses	\$	1,960	\$	1,120	\$	280	\$	-	\$	-	
Short Term Investments	\$	6,814,180	\$	4,736,489	\$	4,562,117	\$	-	\$	-	
Unrecognized Gain or Loss - ST	\$	-	\$	-	\$	-	\$	-	\$	-	
<b>Total Other Current Assets</b>	\$	6,816,140	\$	4,737,609	\$	4,562,397	\$	-	\$	-	
Total Current Assets	\$	14,330,699	\$	17,775,341		21,207,538	\$	-	\$	-	
TOTAL ASSETS	\$	14,330,699	\$	17,775,341	\$	21,207,538	\$	-	\$	-	
LIABILITIES & EQUITY											
Liabilities											
Current Liabilities											
* Accounts Payable	\$	-	\$	-	\$	-	\$	-	\$	-	
Other Current Liabilities											
Liquidity Reserve	\$	250,000	\$	250,000	\$	250,000	\$	-	\$	-	
Total Current Liabilities	\$	250,000	\$	250,000	\$	250,000	\$	-	\$	-	
Total Liabilities	\$	250,000	\$	250,000	\$	250,000	\$	-	\$	-	
Equity	•	,		•	·	•					
Retained Earnings	\$	10,386,901	\$	12,234,671	\$	12,234,671	\$	-	\$	-	
Fund Balance to be Distributed	\$	1,846,029	\$	1,846,029	\$	1,846,029	\$	-	\$	-	
Net Income	\$	1,847,770	\$	3,444,642	\$	6,876,839	\$	-	\$	-	
Total Equity	\$	14,080,699	\$	17,525,341	\$	20,957,538	\$	-	\$	-	
TOTAL LIABILITIES & EQUITY	\$	14,330,699	\$	17,775,341		21,207,538	\$	-	\$	-	
•	<u> </u>		_		_		-				

Notes: \* AP State of New Hampshire Payable (June 2021) \$ 9,590,307

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## NHVA Statement of Changes in Net Assets YTD FY2021

Quarter Ended December 31, 2020

		FY21 - Q1 Actual		,			FY21 - Q3 Actual		FY21 - Q4 Actual		FY 2021 YTD Actual		FY 2021 YTD Budget					FY 2021 Annual Budget	
Ordinary Income/Expense																			
Income																			
Assessment Income	\$	3,341,697	\$	3,328,287	\$	-	\$	-	\$	6,669,984	\$	6,184,285	\$	485,699	\$	12,059,485			
Assessment Income - TRICARE (Settlement)	\$	103,217	\$	116,651	\$	-	\$	-	\$	219,868	\$	201,630	\$	18,238	\$	401,145			
Interest Income - Assessments	\$	163	\$	267	\$	-	\$	-	\$	430	\$	49	\$	381	\$	293			
Interest Income - Bank & Sweep (ICS)	\$	13,007	\$	15,039	\$	-	\$	-	\$	28,046	\$	29,339	\$	(1,293)	\$	58,679			
Interest Income - Investments	\$	23,259	\$	9,854	\$	-	\$	-	\$	33,113	\$	47,573	\$	(14,460)	\$	95,146			
Dividend Income	\$	21	\$	5	\$	-	\$	-	\$	25	\$	47	\$	(21)	\$	93			
Investment Advisory fees	\$	(6,520)	\$	(4,678)	\$	-	\$	-	\$	(11,197)	\$	(13,688)	\$	2,490	\$	(27,376)			
Unrecognized Gain or Loss	\$	1,947	\$	(3,553)	\$	-	\$	-	\$	(1,606)	\$	6,460	\$	(8,067)	\$	12,920			
Realized Gain or Loss	\$	603	\$	-	\$	-	\$	-	\$	603	\$	1,808	\$	(1,205)	\$	3,616			
Total Income	\$	3,477,394	\$	3,461,872	\$	-	\$	-	\$	6,939,266	\$	6,457,504	\$	481,762	\$	12,604,002			
Expenses																			
Bank Service Charges	\$	-	\$	-	\$	-	\$	-	\$	-	\$	1,000	\$	(1,000)	\$	2,000			
Vaccine - Annual State Payment	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	9,590,307			
Management Fees	\$	25,000	\$	26,250	\$	-	\$	-	\$	51,250	\$	52,500	\$	(1,250)	\$	105,000			
Professional Fees - Legal	\$	1,204	\$	2,016	\$	-	\$	-	\$	3,220	\$	12,500	\$	(9,280)	\$	25,000			
Professional Fees - Audit	\$	5,500	\$	-	\$	-	\$	-	\$	5,500	\$	5,500	\$	-	\$	8,500			
Insurance	\$	840	\$	840	\$	-	\$	-	\$	1,680	\$	2,000	\$	(320)	\$	4,000			
Postage & Printing (Office)	\$	133	\$	83	\$	-	\$	-	\$	216	\$	270	\$	(54)	\$	540			
Website & SubContractors	\$	-	\$	486	\$	-	\$	-	\$	486	\$	525	\$	(39)	\$	525			
Board Meetings Expense	\$	-	\$	-	\$	-	\$	-	\$	-	\$	455	\$	(455)	\$	910			
Dues & Subscriptions	\$	_	Ś	_	Ś	_	\$	-	Ś	-	Ś	_	Ś	-	\$	_			
TRICARE - Washington	\$	_	Ś	_	Ś	_	Ś	-	Ś	_	Ś	_	Ś	-	\$	-			
Public Information	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-			
Advertising	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-			
Licenses and Fees	\$	75	\$	-	\$	-	\$	-	\$	75	\$	75	\$	-	\$	75			
Total Expenses	\$	32,752	\$	29,675	\$	-	\$	-	\$	62,427	\$	74,825	\$	(12,398)	\$	9,736,857			
Net Ordinary Income	\$	3,444,642	\$	3,432,197	\$	-	\$	-	\$	6,876,839	\$	6,382,679	\$	494,160	\$	2,867,146			
Net Income	\$	3,444,642	\$	3,432,197	\$	-	\$	-	\$	6,876,839	\$	6,382,679	\$	494,160	\$	2,867,146			
Collection Data:																			
Quarter being collected		SFY21 - Q1	_	SFY21 - Q2		FY21 - Q3		21 - Q4											
Payment Due Date		11/15/20		02/15/21	(	05/15/21	08,	/15/21											
Projected Average Monthly Lives		153,000		-		-		-											
Actual Average Monthly Lives		163,122		-		-		-											
Avg Lives Variance +(-)		10,122		-		-		-											
Approved Assessment Rate	\$	6.80	\$	-	\$	-	\$	-	_										
Actual Average Monthly Lives - TRICARE		4,848		-		-		-											
Additional Assessment Rate - TRICARE	\$	8.02	\$	-	\$	-	\$	-											



#### **MEMORANDUM**

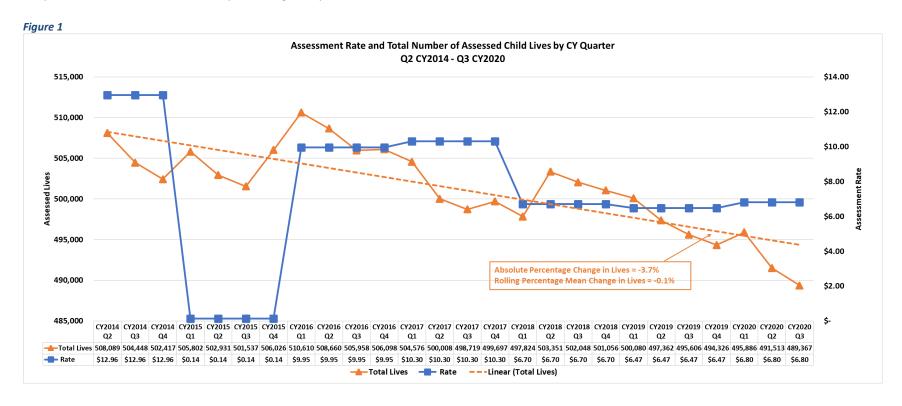
**To:** NHVA Board of Directors, Helms Staff

From: Patrick Miller

Date: January 5, 2021

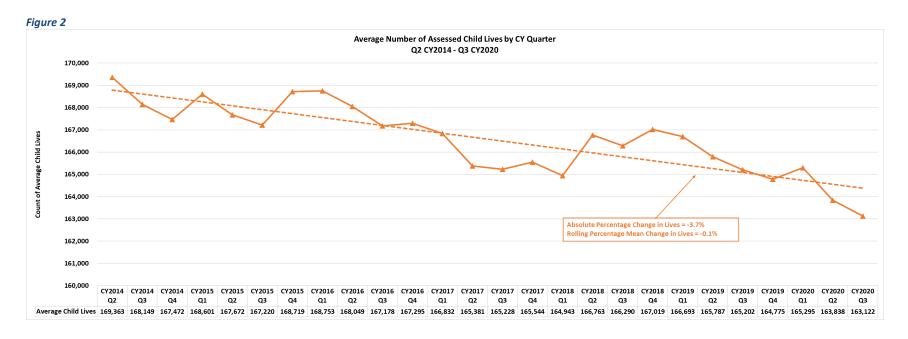
Re: Assessment Trends Update

All outstanding filings from the filing period that closed November 15, 2020 have been received. **Figure 1** depicts the long-term trend of total assessed child covered lives in orange. The absolute percentage drop in lives over this time period is 3.7% whereas the rolling percentage mean drop in lives is 0.1%. The absolute percentage drop from Q1 CY2020 to Q3 CY2020 is 1.3%.





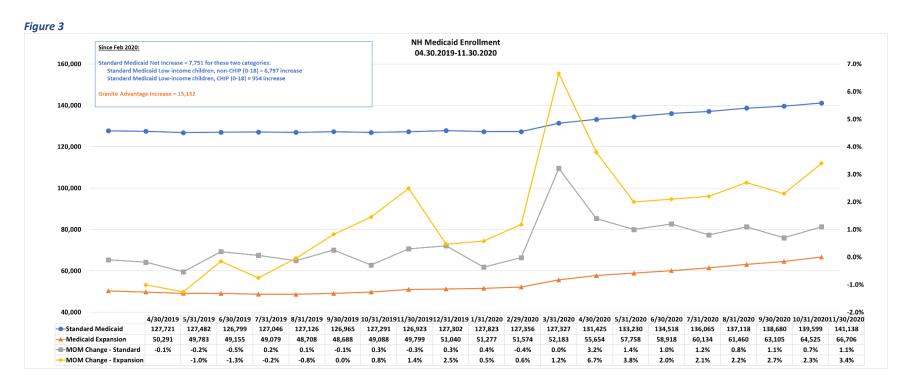
**Figure 2** depicts the same covered lives trend information as **Figure 1**, but it is shown as the <u>average</u> number of assessed child lives for each quarter. The assessment rate setting model assumptions presented at the September 2020 Board meeting assumed 153,000 covered child lives versus the 163,838 shown in the most recent quarter. There was a 2,173 child life drop between Q1 and Q3 CY2020 as shown in **Figure 2**.



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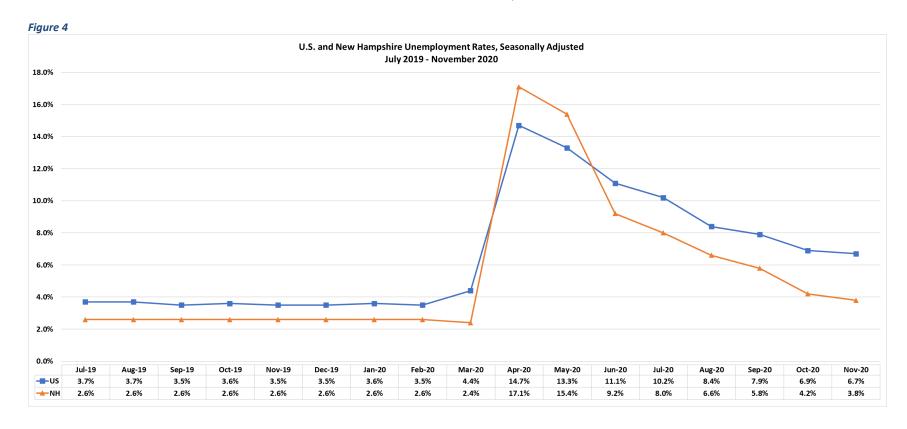
**Figure 3** depicts the most recent 20 months of NH Medicaid enrollment figures. The child lives for Standard Medicaid increased by 7,751 since the pandemic began, while the total Granite Advantage lives increase by 15,132. The December data should be available mid-January.



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**Figure 4** depicts the most recent 17 months of U.S. and New Hampshire unemployment rates. There has been a steady decline in both rates since the highs seen in April 2020 at the beginning of the pandemic. The November 2020 New Hampshire rate of 3.8% is now only 1.4% above the March 2020 rate of 2.4%. The December data should be available mid-January.



In summary, the impacts of the COVID-19 pandemic on total assessed child lives have been less to date than they were assumed to be in the rate setting model from September 2020. We will continue to monitor these monthly and quarterly trends and incorporate the data into next year's rate setting process. Please let me know if you have any questions or comments.