The Business of Immunization: Protecting Kids Without Destroying Your Practice

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Learning Objectives:

At the conclusion of the session, participants should be able to:

- 1. Identify various expenses related to, but not covered by, vaccine product purchase and administration.
- 2. Measure and calculate distributed practice expenses.
- 3. Determine the impact of vaccinating adults.





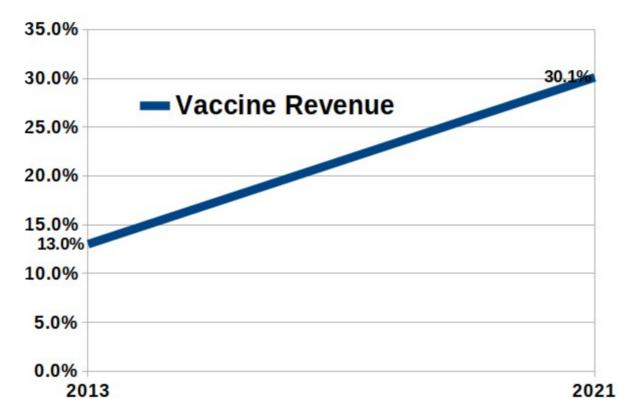
To be able to sustain administering vaccines, providers must be paid at a level that ensures recovery of the total direct and indirect expenses. After all, pediatric practices spend a significant cost on vaccines, which are the second highest expense following payroll for many practices. Furthermore, public and private sector payers must recognize that a pediatric practice is a business entity and must run on sound, generally accepted business principles. For practices to remain viable, they must be paid for the full costs of vaccine-related expenses and generate a margin for all components of vaccination.

https://downloads.aap.org/AAP/PDF/The_Business_Case_for_Pricing_Vaccines.pdf





How much of your revenue is vaccine product?







The AAP's Business Case

The Business Case for Pricing Vaccines:

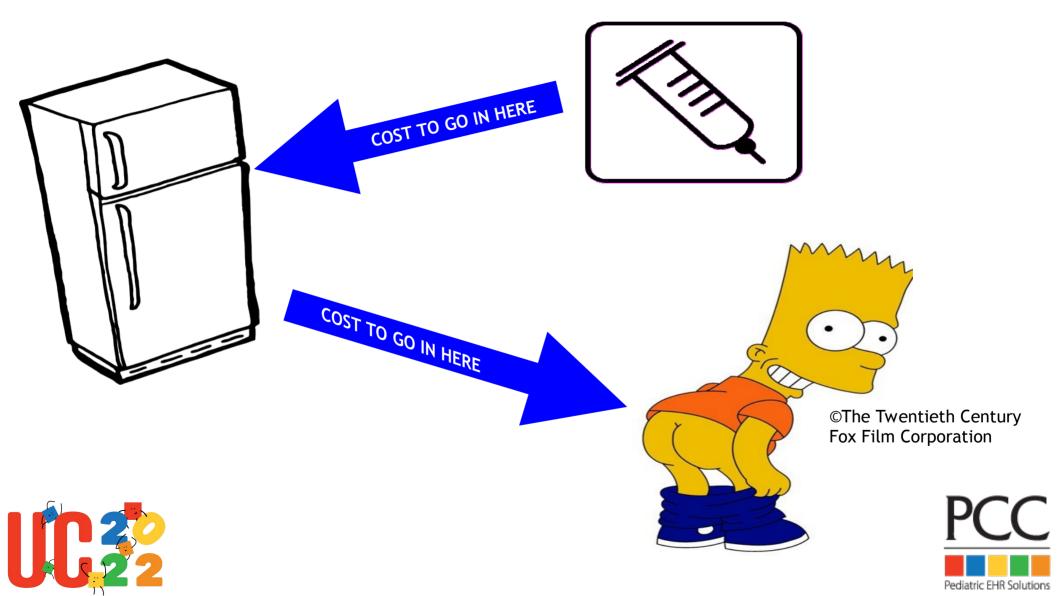
"When the direct and indirect expenses for the vaccine product are combined, this results in total expenses at 17% to 28% over acquisition cost. To sustain and support vaccination in the medical home, payments for the vaccine product should be at the level that covers the total vaccine expenses plus a reasonable margin."



https://downloads.aap.org/AAP/PDF/The_Business_Case_for_Pricing_Vaccines.pdf

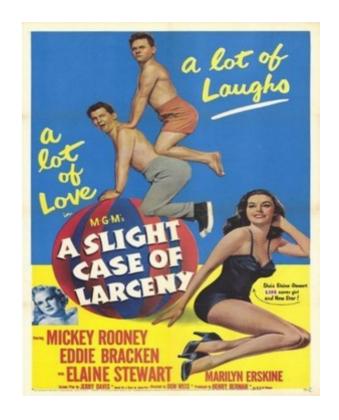






Unfortunate Reality

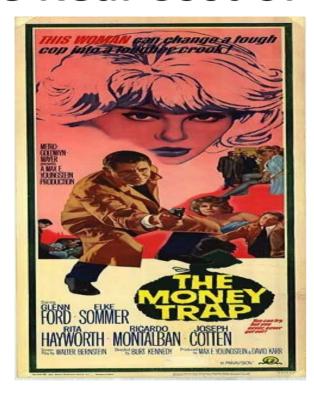
You Are
Not Paid
For
"Carrying Costs"







The Real Cost of Vaccines



What you actually paid, plus "carrying costs:"

- Fridge Costs+
- Exam Table
- Sharps and Waste management
- Waste Insurance
- Wastage, Shrinkage
- Denials, non-payment, collections
- Opportunity





The Real Cost of Vaccines

...and more!

- Personnel Costs
- Negotiation and Research
- Ordering, Delivery, and Payment
- Inventory and Storage Management
- etc.







But wait, what about admins?

CMS/CPT Derived:

- Gloves, Paper, VIS
- Syringe, Needle, Swab, Band-aid
- Nurse Time*
 - Drawing, Preparation, Administration, Counseling, Documentation
- Physician Time*
 - Drawing, Preparation, Administration, Counseling, Documentation









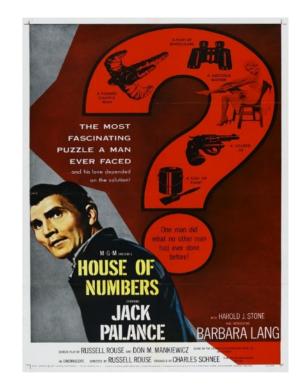


Real Life Calculations

- Many of the costs must be averaged across vaccines
- Approximations required in some instances
- A handful of CMS-derived guidelines

Example Calculation Assumptions:

- 6-8 clinician practice
- ~\$45/vaccine
- 13,000 vaccines/year







Hazardous Waste Costs	\$3,500/year
% of Hazardous Waste due to vaccines	50.00%
\$1,750 divided by 13,000 vaccines	\$.13 / vaccine
Denial/Unpaid Rate	1.00%
Annual Vaccine Product Volume	\$585,000.00
\$5,850 divided by 13,000 Vaccines	\$.45 / vaccine

AAP: "...there is an estimated wastage/nonpayment of at least 5%..."

https://downloads.aap.org/AAP/PDF/The_Business_Case_for_Pricing_Vaccines.pdf





Real Life Calculations - Admin

What are the clinicians' hourly wages?

How much time is spent administering the shot? Preparation, administration, counseling, billing, recording, registry, etc.

"The total documented variable cost per injection (excluding vaccine cost) averaged \$11.51..."

Cost of Vaccine Administration Among Pediatric Practices, Judith E. Glazner, Brenda Beaty and Stephen Berman, Pediatrics 2009;124;S492-S498 (http://pediatrics.aappublications.org/cgi/content/full/124/Supplement_5/S492)





Nurse 1 Annual Cost	\$45,000.00
% of job spent on vaccine management (research, delivery, inventory, logging, etc.)	
\$4,500/year divided by 13,000 vaccines	\$.35 / vaccine
Nurse 2 Annual Cost	\$35,000.00
% of job spent on vaccine management (research, delivery, inventory, logging, etc.)	
\$7,000/year divided by 13,000 vaccines	\$.54 / vaccine

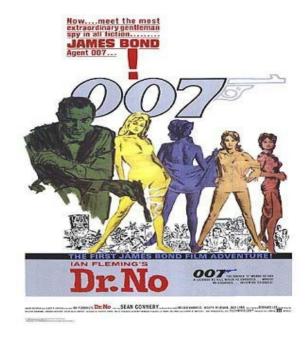




Real Life Examples

Reconciliation Costs:

- "12 Hours, annually"
- "8 Hours, annually" (\$114)
- "325 hours, annually" (\$5950)
- "104 hours, annually" (\$20,300)



Based on sample responses from survey data, 2009, supplied by the Verden Group

(\$588)





	Benefits	Carrying Cost Work	Costs	Cost
Nurse 1	\$50,000.00	30%	\$15,000.00	
Nurse 2	\$45,000.00	25%	\$11,250.00	
Nurse 3	\$38,000.00	10%	\$3,800.00	
Doc 1	\$250,000.00	1%	\$2,500.00	
Doc 2	\$300,000.00	1%	\$3,000.00	
			\$35,550.00	\$2.73
Waste Management	Attributable to Vaccines		Total Waste Management	
\$3,000.00	70.00%		\$2,100.00	\$0.16
Value of Imms On Site		Interest	Total Cost of Capital	
\$75,000.00		5.00%	\$3,750.00	\$0.29
ខ្ពង្សុទ្ធical Overhead (Fridge,				
\$3,000.00				\$0.23
TOTAL PER VACCINE			Per Vaccine	\$3.42

% of

Salary and



Staffing



Staff Carrying Average

Vaccine	Invoice	Units	Wasted/ Missing Value	Unpaid Value	Distributed Carrying Costs	Estimated Cost	%age Of Cost	125% Of Direct Cost
TdaP	\$100.00	1000	\$1.00	\$3.00	\$12.69	\$116.69	117%	\$125.00
HPV	\$180.00	500	\$1.80	\$5.40	\$12.69	\$199.89	111%	\$225.00
IPV	\$8.95	2000	\$0.13	\$0.27	\$12.69	\$22.04	246%	\$11.19
		3500	\$2,169	\$6,237				





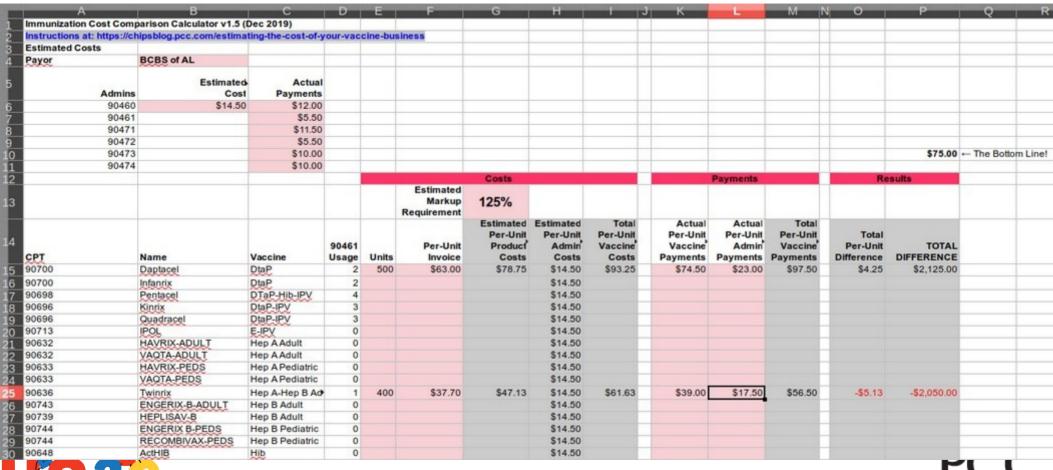
Vaccine	Units	Actual Product Payments	Actual Admin Payments	Invoice	Calculated Carrying Costs	Calculated Antigen- Admin Costs	Total Calculated Antigen Costs	Actual Antigen Payment	Calculated Difference
Tdap	1000	\$30	\$18	\$28	\$8.75	\$14.25	\$51.00	\$48.00	\$3000.00
MMR	2000	\$10	\$22	\$8	\$6.75	\$14.25	\$29.00	\$32.00	\$6000.00
DTaP	500	\$100	\$22	\$101	\$10.75	\$14.25	\$126.00	\$122.00	-\$2000.00

https://chipsblog.pcc.com/estimating-the-cost-of-your-vaccine-business





https://chipsblog.pcc.com/estimating-the-cost-of-your-vaccine-business





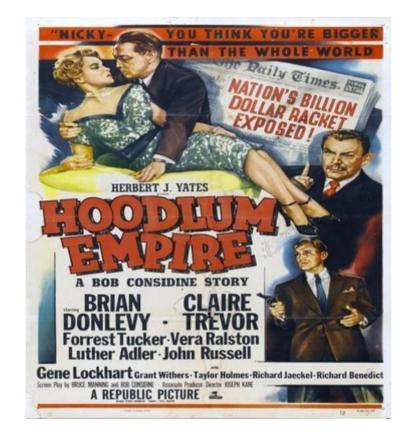
https://chipsblog.pcc.com/estimating-the-cost-of-your-vaccine-business





How Do I Fix This?

- Vaccine Payments?
 - Negotiate
 - Determine methodology
 - Use CDC public pricing, not your invoice!
 - Manage price increases
 - Multiple CPT options







How Do I Fix This?

- Administration Payments?
 - Code properly
 - Negotiate
- Vaccine Costs?
 - GPO
 - Fridge-based purchasing
 - Maximize purchasing/inventory
 - Credit Cards, payment terms



https://chipsblog.pcc.com/a-little-imms-admin-analysis-tool





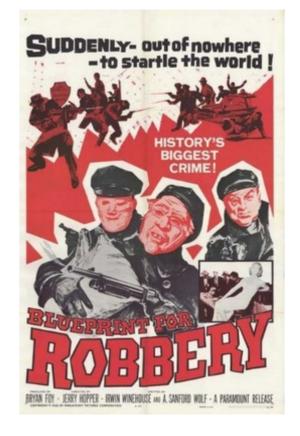
Α	В	С	D	E	F	G	H	
DCC		V1.2	12/15/19					
PCC	Pediatric EHR Solutions							
			Results					
	Count		Total Imms	3500				
90460	3200		Total Primary Admins	3560				
90461	1200							
90471	350			60	← Unit differe	nce between	admins and	vaccines
90472	10			1.7%	← %age diffe	rence betwee	n admins an	d vaccine
90473	0							
90474	0			If the number	r is negative, t	hat means th	ere were mo	re shots
Total	4760			recorded tha	n primary adn	ninistrations.		
2.7	7 ←Ratio of 90460:90461							
8.9	9 ←Ratio of 90460:90471-4							
Manually er	nter your data in Column D or cut a	nd paste yo	ur CPTs and unit volum	e into the 'lmr	ns' tab			
Manually er	nter your data in Column D or cut a	Admin Da	ta	e into the ' <u>lm</u> r	\sim			
		Admin Da Additional	ta	Expected	Expected			
CPT_Code	CPT_description	Admin Da Additional Antigens	Count	~	\sim			
CPT_Code 90460	CPT_description Admin, 1st Component	Admin Da Additional Antigens	Count 3200	Expected	Expected			
CPT_Code 90460 90461	CPT_description Admin, 1 st Component Admin, 2 nd and Addl	Admin Da Additional Antigens 0	Count 3200	Expected	Expected			
CPT_Code 90460 90461 90471	CPT_description Admin, 1st Component Admin, 2nd and Addl Immunization admin	Admin Da Additional Antigens 0 0	Count 3200 1200 350	Expected	Expected			
CPT_Code 90460 90461 90471 90472	CPT_description Admin, 1st Component Admin, 2nd and Addl Immunization admin Immunization admin, Addl	Admin Da Additional Antigens 0 0 0	Count 3200 1200 350 10	Expected	Expected			
CPT_Code 90460 90461 90471 90472 90473	CPT_description Admin, 1st Component Admin, 2nd and Addl Immunization admin Immunization admin, Addl Immune admin oral/nasal	Admin Da Additional Antigens 0 0 0 0 0	Count 3200 1200 350 10 0	Expected	Expected			
CPT_Code 90460 90461 90471 90472	CPT_description Admin, 1st Component Admin, 2nd and Addl Immunization admin Immunization admin, Addl	Admin Da Additional Antigens 0 0 0 0 0 0 0	Count 3200 1200 350 10 0	Expected	Expected			
CPT_Code 90460 90461 90471 90472 90473 90474	CPT_description Admin, 1st Component Admin, 2nd and Addl Immunization admin Immunization admin, Addl Immune admin oral/nasal Immune admin oral/nasal, Addl	Admin Da Additional Antigens 0 0 0 0 Vaccine D	ta Count 3200 1200 350 10 0 0	Expected 90460	Expected 90461 - - - - -			
CPT_Code 90460 90461 90471 90472 90473 90474	CPT_description Admin, 1st Component Admin, 2nd and Addl Immunization admin Immunization admin, Addl Immune admin oral/nasal Immune admin oral/nasal, Addl Diphtheria, tetanus toxoids, acellu	Admin Da Additional Antigens 0 0 0 0 Vaccine Da 3	ta Count 3200 1200 350 10 0 0 ata	Expected 90460	Expected 90461			
CPT_Code 90460 90461 90471 90472 90473 90474 90696 90697	CPT_description Admin, 1st Component Admin, 2nd and Addl Immunization admin Immunization admin, Addl Immune admin oral/nasal Immune admin oral/nasal, Addl Diphtheria, tetanus toxoids, acelludorality	Admin Da Additional Antigens 0 0 0 0 Vaccine Di	ta Count 3200 1200 350 10 0 0 ata 1000	Expected 90460	Expected 90461			
CPT_Code 90460 90461 90471 90472 90473 90474 90696 90697 90703	CPT_description Admin, 1st Component Admin, 2nd and Addl Immunization admin Immunization admin, Addl Immune admin oral/nasal Immune admin oral/nasal, Addl Diphtheria, tetanus toxoids, acellu Diphtheria, tetanus toxoids, acellu Tetanus toxoid adsorbed, for intra-	Admin Da Additional Antigens 0 0 0 0 Vaccine Da 3 5	ta Count 3200 1200 350 10 0 0 ata 1000 0	Expected 90460	Expected 90461			
CPT_Code 90460 90461 90471 90472 90473 90474 90696 90697 90703 90707	CPT_description Admin, 1st Component Admin, 2nd and Addl Immunization admin Immunization admin, Addl Immune admin oral/nasal Immune admin oral/nasal, Addl Diphtheria, tetanus toxoids, acellu Diphtheria, tetanus toxoids, acellu Tetanus toxoid adsorbed, for intra Measles, mumps and rubella virus	Admin Da Additional Antigens 0 0 0 0 Vaccine Da 3 5	ta Count 3200 1200 350 10 0 0 ata 1000 0 2000	Expected 90460	Expected 90461			
CPT_Code 90460 90461 90471 90472 90473 90474 90696 90697 90703 90707 90708	CPT_description Admin, 1st Component Admin, 2nd and Addl Immunization admin Immunization admin, Addl Immune admin oral/nasal Immune admin oral/nasal, Addl Diphtheria, tetanus toxoids, acellu Diphtheria, tetanus toxoids, acellu Tetanus toxoid adsorbed, for intra Measles, mumps and rubella virus Measles and rubella virus vaccine	Admin Da Additional Antigens 0 0 0 0 Vaccine Da 2 1	ta Count 3200 1200 350 10 0 0 ata 1000 0 2000	### Expected 90460	Expected 90461			
CPT_Code 90460 90461 90471 90472 90473 90474 90696 90697 90703 90707	CPT_description Admin, 1st Component Admin, 2nd and Addl Immunization admin Immunization admin, Addl Immune admin oral/nasal Immune admin oral/nasal, Addl Diphtheria, tetanus toxoids, acellu Diphtheria, tetanus toxoids, acellu Tetanus toxoid adsorbed, for intra Measles, mumps and rubella virus	Admin Da Additional Antigens 0 0 0 0 0 Vaccine Da 2 1 3	ta Count 3200 1200 350 10 0 0 ata 1000 0 2000	Expected 90460	Expected 90461			





How Do I Fix This?

- Administration Costs?
 - Improve Efficiency
 - 2D Barcoding
 - Inventory Management







Why?

Location, location

Many adults disconnected from adult primary care

Trust!

Vaccine storage and handling excellence

Sunk cost of vaccine storage/generator/alarm system- marginal cost each dose is low

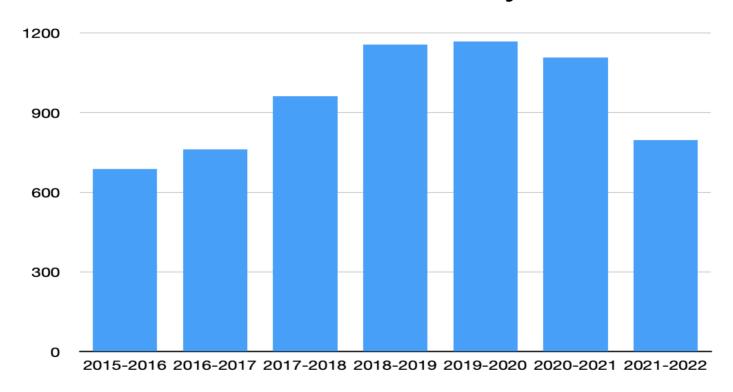
Kids think it is funny to see mom and dad get a shot

More convenient for parents "you don't mind that my kids are here"





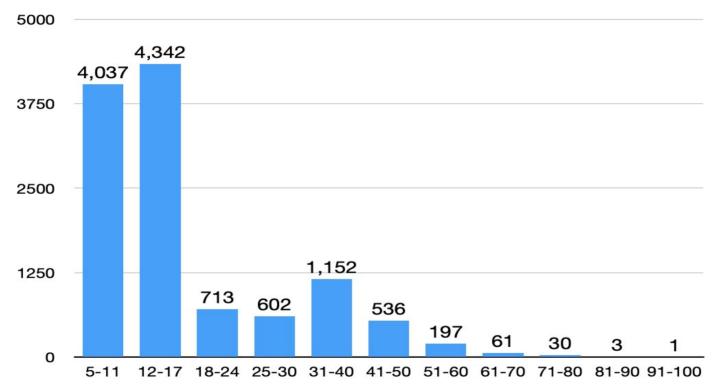
Flu vaccine 21 yo+







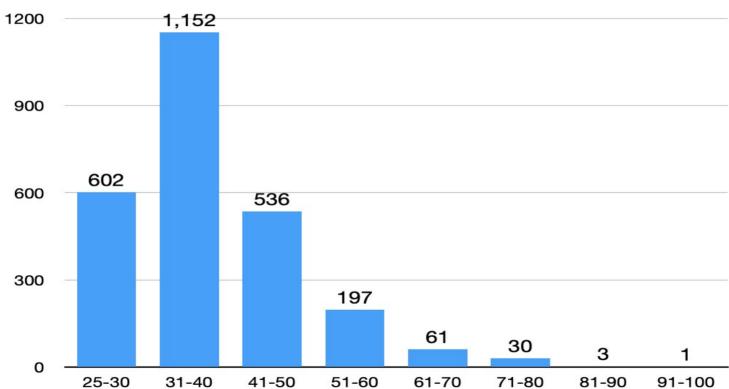
COVID vaccine overall





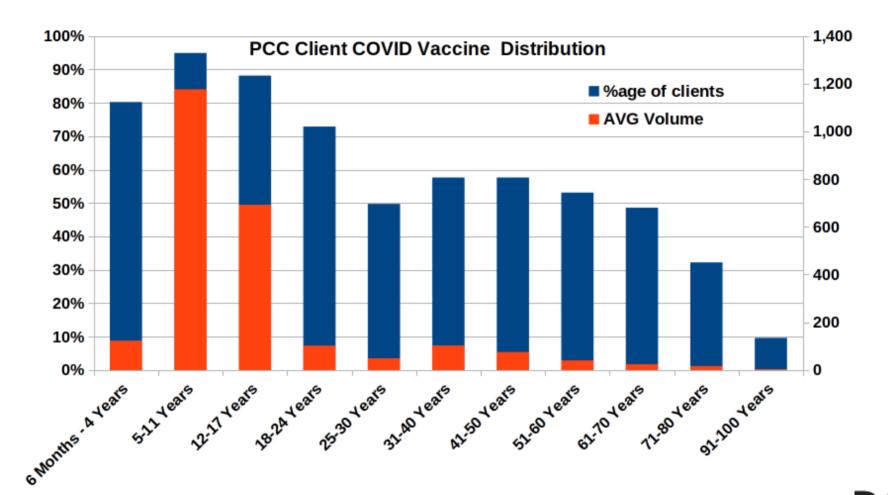


Adult COVID vaccine













COVID vaccine

Pediatricians trusted experts

Use our relationships for good

Fight back against this disease who has taken so much from us and our children

COVID Orphans





Imperial College London

COVID-19 Orphanhood

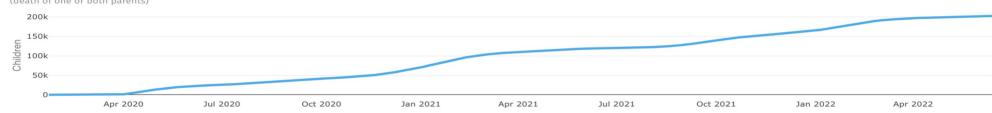
United States of America

Orphanhood estimates:

202,500

(death of one or both parents)





Estimates of loss of primary caregiver:

217,000

(death of one or both parents or death of custodial grandparents)

Estimates of children losing primary or secondary caregivers:

254,700

(death of one or both parents, death of custodial grandparents, and/or death of other co-residing grandparents)







Changes You May Wish To Make In Practice

- Calculate your "carrying costs" and apply them to the cost of your vaccines.
- Determine what your true overhead for vaccines is does it match the AAP expected value of 17-25% above invoice costs?
- Review your vaccine delivery workflow to look for \$\$ leaks.
- Confirm that you are on an actively managed and effective GPO.
- Use the AAP literature to support your negotiations with payors.





References

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For more information on this subject, see the following publications:
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https://www.aap.org/en-us/Documents/payeradvocacy_business_case_pricing_imm_admin.pdf
https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/immunization/Pages/payment-coding-billing.aspx
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http://www.cdc.gov/vaccines/programs/vfc/awardees/vaccine-management/price-list/
Cost of Vaccine Administration Among Pediatric Practices, Judith E. Glazner, Brenda Beaty and Stephen
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http://pediatrics.aappublications.org/cgi/content/full/124/Supplement_5/S492
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https://practicewell.org/immunization-vaccine-survival-guide.pdf
https://www.cdc.gov/vaccines/programs/iis/2d-vaccine-barcodes/downloads/2D-Findings-Report-508.pdf
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[all of the AAP documents above are presently unavailable]





Great Old Movie Poster









What Questions Do You Have?

Questions posted in the Socio will be read aloud by moderator for the presenter to answer. Please post your questions in Socio now.





Later Viewing

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PCC's YouTube Channel



