See what's happening with the California Health Benefits Review Program!



Letter from the Director

Greetings! Welcome to CHBRP's Spring Quarterly Newsletter.

We are gratified by the opportunity to provide objective, evidence-based analysis to support legislators and legislative staff. These extraordinary individuals grapple with hundreds of pieces of legislation; our work supports them and provides a wealth of



information used by them, as well as many other stakeholders. As we recover from many very late nights, I am also personally grateful and awed by the tremendous diligence, talent, and effort demonstrated by each and every CHBRP contributor; whether it be from our staff or campus-based analyst teams, actuaries, senior faculty and national advisory council reviewers, or content experts. Every legislative cycle is an intense one, and planning is very difficult. Predicting the number and complexity of bills that might get introduced (and referred to us) is a task for which no crystal ball has been found (but, if you have one, please share it with us!).

In recent weeks, CHBRP received 15 requests from the Senate and Assembly Health Committees to complete analyses on a variety of bills. The full list of analyses is included below. CHBRP attended the Senate and Assembly Health Committee Sacramento Hearings on several occasions in April to answer any questions about the analyses, and we continue to be available to the Legislature, bill authors, and stakeholders throughout the legislative cycle. CHBRP frequently provides follow up letters to our analyses as the bills are amended to provide interpretation of our findings in light of new bill language. In this issue, you can see where each of the 15 bills we analyzed are in the legislative process. We'll update this list in our next newsletter. Also, in this newsletter, we provide a brief snapshot of a couple of our fantastic faculty, and we also profile two talented graduate interns joining us this Summer.

Thank you for your interest in our work, and if you have suggestions or feedback you wish to share with us, we welcome it (I can be reached directly at garen.corbett@chbrp.org).

Until next time, Garen

CHBRP Staff News

CHBRP Welcomes Two Summer 2019 Interns



Jeff Rollman, MPH, NRP is a PhD student in the Department of Health Policy and Management at the UCLA Fielding School of Public Health. Jeff previously worked as a corporate safety specialist, 911 paramedic and EMS safety officer in central Pennsylvania. He has research interests in regulatory policy, primary care coordination, injury prevention and EMS systems improvement. In addition to his doctoral studies and graduate student researcher position at the Veterans Health Administration, Jeff continues to work part-time as a paramedic in the Los Angeles area. He holds a Master of Public Health in Health Systems and Policy from the Johns Hopkins Bloomberg School of Public Health. Welcome, Jeff!



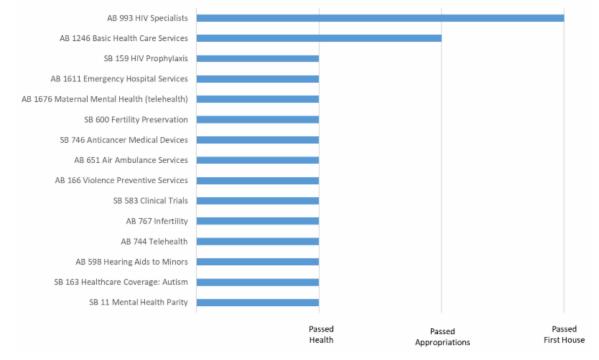
Kyle Navarro is honored to be a graduate intern for CHBRP and is excited to assume the role to further explore the possibilities of the public policy realm. He is a current Masters in Health Policy at the University of California, San Francisco's School of Nursing and a bachelors-prepared Registered Nurse and Public Health Nurse with aspirations to continue engaging in the research process to pursue a PhD and become a professor at a school of nursing.

Kyle hopes to bring his passion for empowering communities, engaging in the policy process, and foundation-building to the work he will be doing at CHBRP. In addition to his interests in nursing and health & public policy, Kyle enjoys spending his free time as a vocalist in a band, running, and livestreaming a variety of hobbies on services like YouTube, Twitch, and Facebook. Welcome, Kyle!

2019 Bills - Current Status

CHBRP completed 15 analyses in 2019. The reports, bill language as analyzed, and Key Findings are available for each analysis at http://chbrp.org/completed analyses/index.php.

While many of the bills have been amended since CHBRP analyzed the versions as introduced, most if not all of the analysis is still relevant. Take a look at the reports published to the website to see what impacts these bills may have on Californians. The following graphic shows the current status of bills that CHBRP analyzed in 2019.

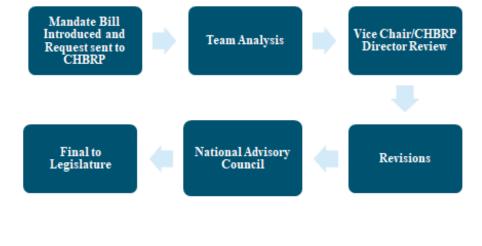


Current as of May 8, 2019

CHBRP's Analytic Timeline

Each analysis is completed within a 60-day period. This strict timeline ensures that reports are submitted before the Legislature formally considers the bill. The figure below shows an overview of the different analytic and review periods within the 60-day timeline.

CHBRP's 60-Day or Less Timeline



CALIFORNIA HEALTH BENEFITS REVIEW PROGRAM

The analytic teams are comprised of a CHBRP staff member, who coordinates the contributions of a subset of the Faculty Task Force, researchers, librarians, and members of CHBRP's contracted actuarial firm. The task force is drawn from several University of California campuses, a list that currently includes Berkeley, Davis, Irvine, Los Angeles, San Diego, and San Francisco. These teams of approximately 8-10 members are formed within 2-3 days of the Legislature requesting a CHBRP analysis of a bill. Frequently, team members analyze multiple bills at a time.

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CHBRP analyses are reviewed multiple times before the report is delivered to the Legislature. The first review is conducted by the Vice Chairs (UC Faculty members who lead an analytic section, such as Medical Effectiveness, Cost, or Public Health) and CHBRP's director. A peer faculty member (a UC Faculty member who provides guidance throughout the report's 60-day timeline) may also review at this time. The second review is conducted by the content expert (experts in pertinent areas of clinical practice, clinical controversies, and research are retained for each analysis) and a subset of the National Advisory Council (health care and health policy experts from outside of California).

More information about CHBRP's 60-day timeline is included at www.chbrp.org:

 Analysis Methodology (including a sample 60-day timeline) http://chbrp.com/analysis methodology/index.php



Faculty Spotlight: Dylan Roby, PhD

Although now an Associate Professor at the University of Maryland's School of Public Health, Dr. Roby also maintains a faculty appointment in the UCLA Fielding School of Public Health's Department of Health Policy and Management and with UCLA's Center for Health Policy Research. Dr. Roby grew up in California, attended UCLA as an undergraduate, and loves staying engaged with California policy issues and the great colleagues at UCLA and throughout the UC System. He is a cost lead on the CHBRP team, which means he works closely with the actuarial

team and the other leads to assemble evidence, interpret it, and model future utilization and spending. He is also part of the California Simulation of Insurance Models (CalSIM) team at UCLA/UC Berkeley [hyperlink: www.calsim.org], which is an input into CHBRP's population model.

When asked how he became interested in health policy, he explains that his first exposure was as an undergraduate at UCLA. He was lucky to have fantastic mentors as an impressionable 19 year-old; his first was Governor Mike Dukakis, who taught a course at UCLA on the American Presidency. His project for that course focused on the failure of the Clintons' Health Security Act. That summer, he interned for Dr. Tom Prendergast, who was the San Bernardino County Public Health Officer, and when he returned to UCLA for fall of his junior year, he was convinced he wanted to go into public health and health policy. When looking into public health degrees at UCLA in the fall, he then met health policy researcher and professor, E. Richard "Rick" Brown, who had just started a new Center for Health Policy Research (which was rare at the time). And when seeking a volunteer opportunity for undergraduates, and was linked to a young, energetic, recent PhD graduate named Nadereh "Nady" Pourat (now CHBRP's Cost Vice Chair), and the rest is history. Twenty-three years later, and they are still working together on CHBRP!



Guendelman, PhD, LCSW

Dr. Guendelman is Professor (Emeritus) of the School of Public Health at UCB and founder of the Wallace Research Center for Maternal, Child and Adolescent Health, a new center that aims to advance the MCAH field through the use of technology. With a multi-disciplinary team of engineering students, public health students and a Co-Principal investigator who is a demographer and MD, she is currently doing research funded by Packard Foundation on a project using Google data to identify what people search for and the top websites visited when searching for abortion and

birth control in the United States. As part of this project they are examining the drivers of online searches for abortion and for birth control at a time when increasing stigma, funding cut-backs and legal restrictions on reproductive choices are pushing people to search online for information that they care about. In addition, she consults and continues to do research on migration and health and birth outcomes of disadvantaged women.

She has been working with CHBRP for the past 13 years as a peer reviewer of multiple bills, a thoroughly satisfying experience since it allows her to see in action the policy applications and implications of diverse bills, including many in the field of maternal and child health. The opportunity to assess bills from a medical effectiveness, cost/utilization and public health perspective offers a wide-ranging view of the ramifications of a bill. She finds the opportunity to work with a group of remarkably thoughtful, intelligent scholars and advocates very enriching.

When asked how she became interested in health policy, she says she started out as member of the faculty at UC Berkeley's School of Public Health in the Health Policy and Management Program in the 1980's, at a time when the Latino population was just beginning to surge in California. She furthered her interest in health policy doing research on access to care for the Latino population, including an exploration of who crossed the border for healthcare and what were the determinants of use of care among immigrants in the US. This research was complemented by teaching the only course on campus on Health and Social Policy in Mexico and Latin America, which allowed her to take students to Tijuana on a short visit to introduce them to living conditions and health policy "in action" across the border. This initial effort led her to various other projects of binational or California state-wide interest related to obesity, women's health, maquiladora work, health insurance coverage among the working poor and birth outcomes of immigrant women.

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