



See What's Happening With The California Health Benefits Review Program!

See What's
New



Academic Rigor On A Legislature's Timeline

Letter From The Director

Welcome to CHBRP's Winter Newsletter.

December rains have turned into sunny and dry January days in the Bay Area. As we settle into 2022, we wish to recognize the tumultuous nature of life the past couple of years, and the extraordinary strain of recent events on so many people, from nearly every walk of life. We extend our warmest wishes for good health and fortune to each of you, our readers and partners. I wanted to highlight our preparations for our legislative cycle (that has already begun), and share a few updates.



CHBRP's Legislative Briefing was held virtually (via Zoom webinar) on January 20th. Thank you to everyone who attended! A recording of the event as well as presentation slides are linked below.

CHBRP has completed [three requests](#) for the Assembly and Senate Health Committees in recent weeks. We completed our analysis of AB 933 (Prescription Drug Cost Sharing) as well as letters and fiscal estimates for SB 473 (Insulin Cost Sharing) and AB 1400 (Guaranteed Health Care for All). We expect more requests for CHBRP analysis in the month of February.

The CHBRP Team (staff, Faculty Task Force members and contributors, and National Advisory Council members) have all been studious in preparing for CHBRP's upcoming "peak season". We are delighted to be welcoming some new members to CHBRP's Task Force.

I hope that by our next quarterly newsletter, we will be well on our way to entering the endemic phase of the COVID-19 pandemic. This point (when more of life can be normalized) is when viral infections are not causing the terrible hospitalizations of the pandemic phase, and we'll have enough immunity as a population so they are kept down to low levels. Fingers crossed!

Until next time,

Garen

CHBRP's 2022 Legislative Briefing

CHBRP's annual Legislative Briefing took place last week on January 20th. This was an opportunity for legislators, legislative and agency staff, advocates, health plan staff, and the public to learn more about CHBRP. At this year's briefing, we discussed the analytic approach used by CHBRP and demonstrated how CHBRP serves as a bridge between academia and the policy-making process within the Legislature's fast timeline.

For those who were unable to attend or who wish to re-watch the event, the webinar recording and presentation slides are now available on CHBRP's website under Recent Presentations.

2022 Legislative
Briefing

2022 Requests and Completed Analyses

Some bills analyzed by CHBRP in 2021 have become "two-year" bills, which are bills that are introduced in the first half of the two-year session but do not move through both houses before the interim recess. Two-year bills must clear their house of origin by January 31st of the second year.

The Legislature requested that CHBRP analyze or provide updated projections for three bills introduced in 2021. CHBRP completed these analyses and updated letters in early 2022:

- Assembly Bill 933 (Daly) Prescription Drug Cost Sharing
- Assembly Bill 1400 (Kalra) Guaranteed Health Care for All
- Senate Bill 473 (Bates) Insulin Cost Sharing

Senate Bill 475 (Dates) Insulin Cost Sharing
CHBRP will likely receive additional requests to analyze bills introduced in 2022 in the coming weeks. Requests will be announced via our listserv.

Analyses are posted to CHBRP's website and distributed via the listserv once complete. All interested parties who believe they have scientific evidence relevant to CHBRP's analysis of proposed health insurance benefit mandates are encouraged to provide that information to CHBRP's staff within 14 days of announcing the legislative request. Information can be sent to info@chbrp.org.

As these bills move through Committees, CHBRP publishes an "Amendments Update" document ahead of key hearings that will indicate the portions of CHBRP analyses that remain relevant after amendments are made to analyzed bills. This is available on CHBRP's website under Completed Analyses, and CHBRP will also notify readers when a new version is posted via our email listserv.

Completed Analyses

Recently Published Documents

CHBRP has recently published or updated the following documents, available on CHBRP's website under Other Publications:

- **Policy Snapshot: Public Health Insurance Option Plans.** This document provides an overview of a public option and details recent public option related state activity from 2018 to 2021.
- **Issue Brief: Balance Billing Prohibitions and the No Surprises Act** This brief discusses laws and regulations that prohibit out-of-network (OON) providers from issuing surprise bills to enrollees in plans or policies regulated by DMHC or CDI.
- **Issue Brief: Medical Necessity Determination Process for Covered Benefits.** This brief discusses the medical necessity determination process, which may involve multiple clinicians, for enrollees in health plans and health policies regulated by the Department of Managed Health Care (DMHC) or the California Department of Insurance (CDI).
- **Resource: 2022 Estimates, Deductibles in State-Regulated Health Insurance.** This resource discusses deductibles and their interaction with other forms of cost sharing, as well as estimates regarding their presence among state-regulated health insurance, potential impacts of new prohibitions on their application, and related state and federal law.
- **Issue Brief: California State Benefit Mandates and the Affordable Care Act's Essential Health Benefits.** This brief provides background on Essential Health Benefits (EHBs) in California and how they interact with current and proposed state benefit mandates. This brief also describes changes to federal EHB regulations and discusses California's options for future modifications of the state's selected set of EHBs.
- **Resource: The Federal Preventive Services Benefit Mandate and Related California Mandates.** This resource identifies potential overlap between the federal benefit mandate requiring health insurance coverage of some preventive services and California state benefit mandates.

Other
Publications

CHBRP is currently updating the following documents, available soon on CHBRP's website:

- **Resource: Estimates of Sources of Health Insurance in California for 2023.**This resource will discuss CHBRP's 2023 estimates of sources of health insurance in California.
- **Resource: Estimates of Pharmacy Benefit Coverage in California for 2023.**This resource will note the presence or absence of a pharmacy benefit among Californians enrolled in health plans regulated by the California Department of Managed Health Care (DMHC) and health policies regulated by the California Department of Insurance (CDI).

Task Force Spotlight

Each newsletter, CHBRP features two Task Force members and the important work they do outside of CHBRP. See more information about all of our Task Force members on CHBRP's website.

CHBRP's Task Force

Karen Andrews, MLS

Karen Andrews worked at UC Berkeley's School of Public Health library to provide reference services and database trainings to students, faculty, and staff for about 15 years until the closure of the library. Through the School of Public Health, she also collaborated with the California Department of Public Health (CDPH) to provide document delivery service, trainings, and literature searches. Ms. Andrews has also spent over 20 years working with the Labor Occupational Health Program, which does outreach to workers across California and is involved in occupational safety and health trainings. Since the closure of the School of Public Health library, she has taken on a librarian role at the City College of San Francisco, where she works with freshman and sophomore undergraduates. Ms. Andrews has enjoyed being able to work with a range of students, from graduate students at UC Berkeley to new undergraduate students in San Francisco, and she finds it especially rewarding to help students understand various databases such as PubMed, Web of Science, Scopus, and Embase.



Ms. Andrews recently joined CHBRP as a Health Sciences Librarian. She loves identifying articles and other resources that promote the health and safety of the citizens of California, and she is excited to begin finding and compiling literature for CHBRP analyses that will be reviewed and distilled by the Legislature to inform policy that can help keep Californians safe and healthy.

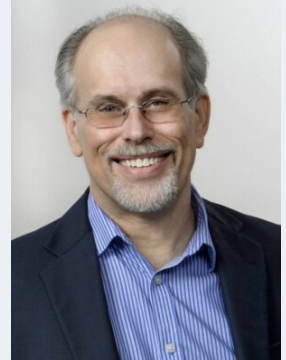
Ms. Andrews initially became interested in health policy during her work with the Labor Occupational Health Program, where she saw how the scientific evidence behind various occupational health hazards could help craft solutions to prevent injuries in the workplace. She then became more involved with the School of Public Health library's work with the CDPH and further saw the important ways in which science informs policy. In her career thus far, Ms.

Andrews is most proud of her contributions to maintaining and promoting the health of Californians,

as exemplified by her favorite quote: *The health of the people is really the foundation upon which all their happiness and all their powers as a nation depend* - Benjamin Disraeli, 1877.

Timothy T. Brown, PhD

Timothy Brown is a health economist on faculty in the Division of Health Policy and Management in the School of Public Health at UC Berkeley. His current role involves researching and teaching courses in health economics, health policy and management, and research methods. Dr. Brown especially enjoys conducting research on important issues in policy and social epidemiology, as well as interacting with his students.



Within CHBRP, Dr. Brown serves as an academic reviewer. He finds his work with CHBRP interesting and rewarding because the work that CHBRP does has immediate real-world impact and improves the lives of Californians.

Dr. Brown has worked in health policy for his entire career. Prior to, as well as during, his time working with CHBRP, he has been a professor, researcher, and consultant to both private and public organizations. Dr. Brown is most proud of his [recent article](#) published in 2020 showing that for every \$1 invested in California county departments of public health, Medi-Cal expenses are reduced by about \$3. This research led him to the important conclusion that in California, public health pays for itself.

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