

California Health Benefits Review Program

*Bridging the Divide: Lessons Learned Providing
Evidence-Based Analysis to the California Legislature*

Faculty at the UC Berkeley School of Public Health

Garen Corbett
Director



CHBRP: BRIDGING ACADEMIA & LEGISLATURE

Take-Aways from my 10 Minutes:

- Impact: How our work is “used” in the policy analysis process?
- Our structure that allows this bridge to work?
- How one can bring objective, timely, evidence-based information to the Legislature
- What areas of expertise are leveraged?

What is CHBRP?

- Independent, analytic resource (in statute) housed at UC to support the Legislature, grounded in objective policy analysis.
- Multi-disciplinary: drawing from faculty & researchers across the University of California.
- We provides rapid, evidence-based information to the Legislature, leveraging faculty expertise since 2003. Moved to UC Berkeley in December of 2017.
- Neutral and unbiased analysis of introduced bills at the **request** of the Legislature

HOW CHBRP WORKS

- Upon receipt Legislature's request, CHBRP convenes multi-disciplinary, analytic teams to provide rigorous, objective analysis *before* policy committee hearing.
- CHBRP staff manage and facilitates:
 - the teams, policy context, ensures reports come together as a cohesive whole.
 - CHBRP staff manage external relationships, contracts, administrative operations.

CHBRP Analyses Provide:

Policy Context

Whose health insurance would have to comply?

Are related laws already in effect?



Medical Effectiveness

Which services and treatments are most relevant?

Does evidence indicate impact on outcomes?



Impacts

Would benefit coverage, utilization, or cost change?

Would the public's health change?

KEY DESIGN FEATURES OF CHBRP: LESSONS

- States can deepen and leverage partnerships with public universities in legislative process
- Ensure impartiality/ objectivity/ strong COI are essential
- The Legislature needs to “Freeze legislation” for analysis period and find or secure a designated revenue source.
- Collaboration and Speed are *essential!*
 - 60 Days: “Blessing and Curse”. Need robust tools/process
 - Peer review, feedback, and drafts create intense bursts of productivity and effort

KEY DESIGN FEATURES OF CHBRP: LESSONS

- Continuous quality improvement
- Engagement with users and stakeholders.
- Year-round staff essential for maintaining institutional memory, tools, emphasis on Quality and Accuracy: Flexibility
- Faculty/researchers have stake and commitment to long-term success of the program. **They see IMPACT of their work.**
- Develop robust templates, timelines, and internal processes that ensure smooth flow

CHBRP's Website: www.chbrp.org

The screenshot displays the CHBRP website interface. At the top, a navigation bar features a blue background with white text and icons for 'About CHBRP', 'Completed Analyses', and 'Recent Requests'. Below this, a 'Quick Links' sidebar on the left lists various site sections. The main content area, titled 'What's New?', contains four news cards with headlines, dates, and 'Keep Reading' buttons. The browser's address bar shows the URL 'http://chbrp.com/' and the Windows taskbar at the bottom includes icons for various applications and the system clock.

Browser address bar: <http://chbrp.com/>

Navigation Bar:

- About CHBRP
- Completed Analyses
- Recent Requests

Quick Links:

- About CHBRP
- Completed Analyses
- Recent Requests
- Analysis Methodology
- Other Publications
- Recent Presentations
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What's New?

View All News

News Cards:

- Updated: CHBRP's 2019 Analyses and Amendments to Bill Language**
Posted 09/19/2019
Keep Reading
- CHBRP has submitted an abbreviated analysis for AB 78: Health: Actuarial Value to the Legislature**
Posted 08/05/2019
Keep Reading
- New Presentation: Review of the 2019-2020 California State Budget**
Posted 09/18/2019
Keep Reading
- CHBRP's Summer 2019 Newsletter**
Posted 08/01/2019
Keep Reading

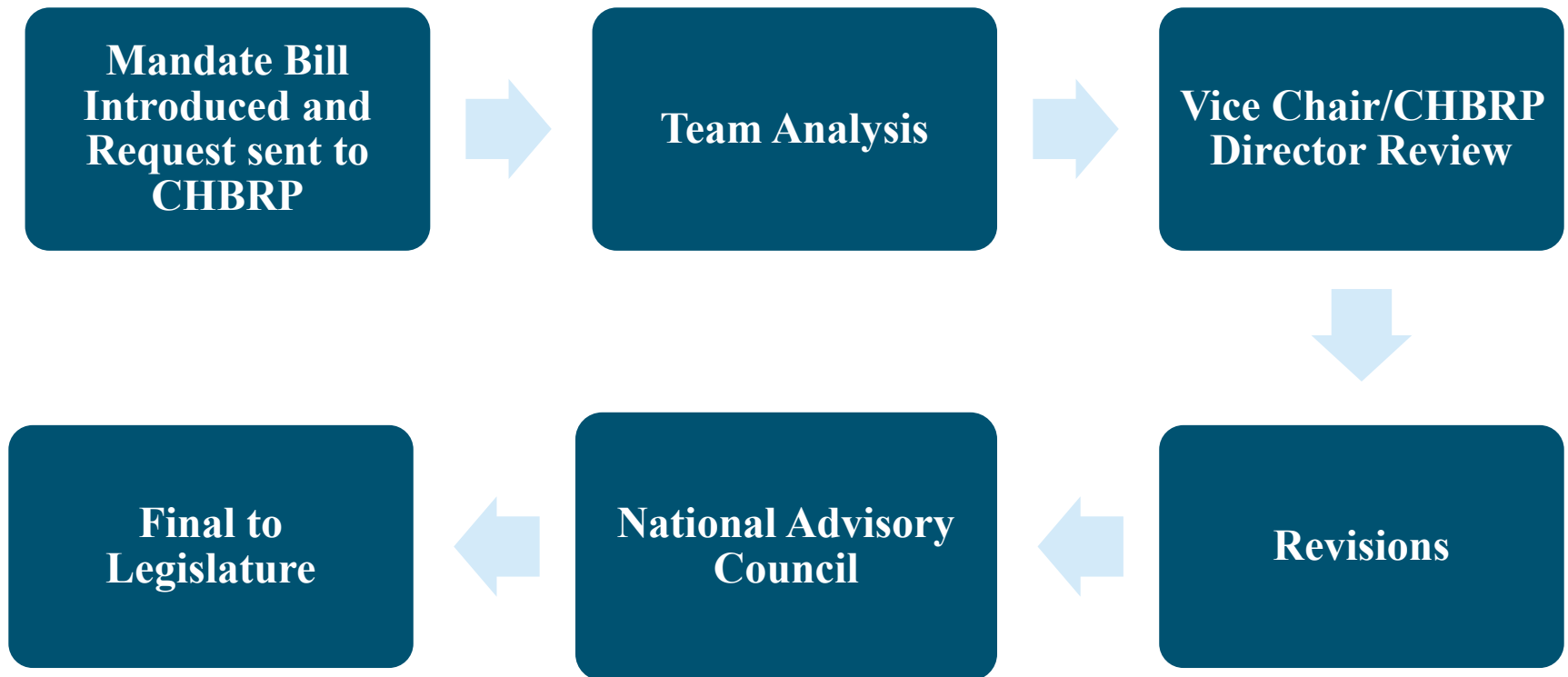
System Tray: 11:04 AM, 10/14/2019

California Health Benefits Review Program

Rapid Analysis

Adara Citron
Principal Policy Analyst

CHBRP's 60-Day or Less Timeline



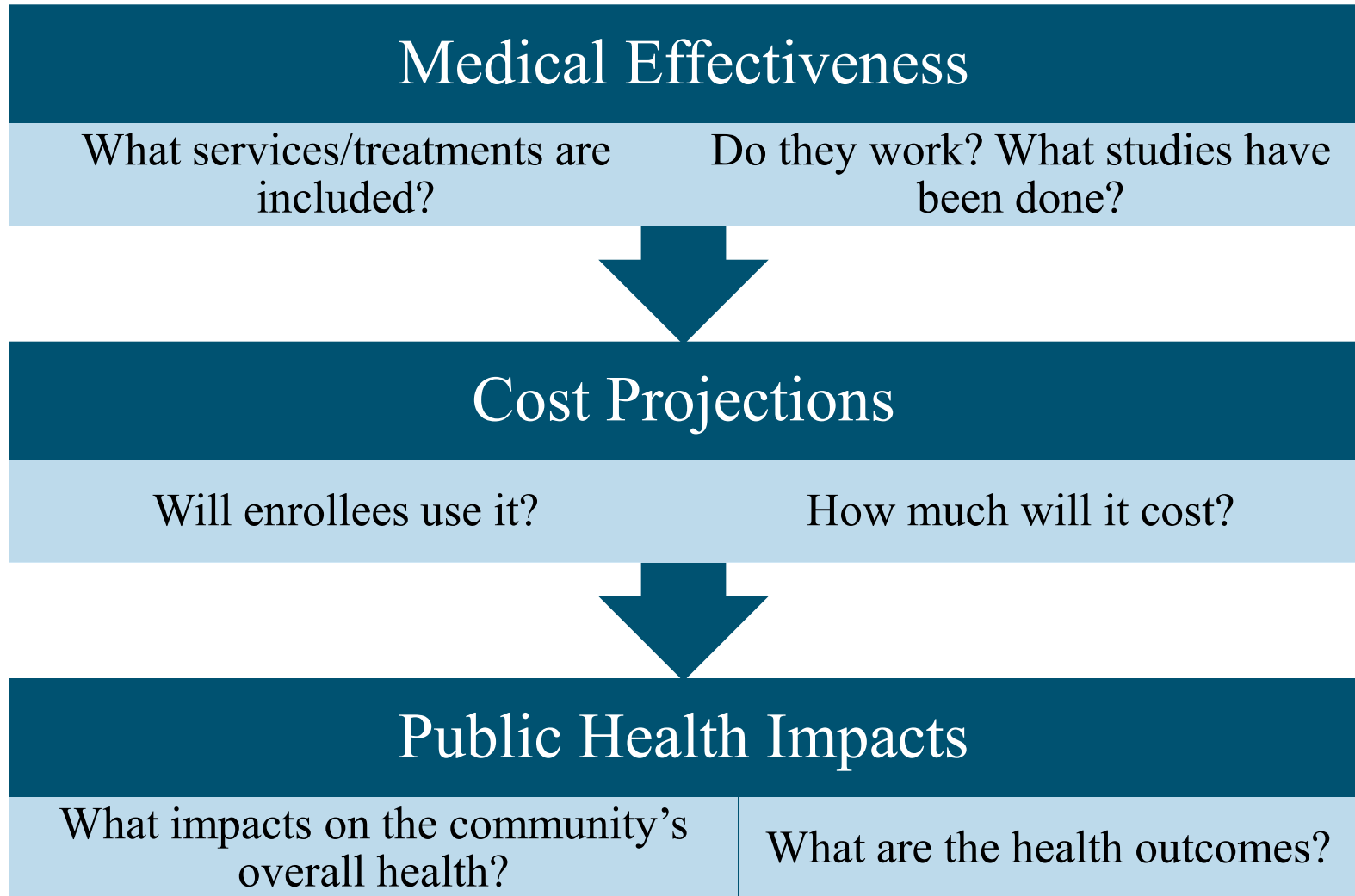
Analytic Teams

- CHBRP Staff (based at UC Berkeley)
- Task Force of faculty and researchers
 - Medical Effectiveness Team
 - Cost Team
 - Public Health Team
- Actuarial firm: Milliman, Inc.
- Librarians
- Content Experts

External Reviewers:

- National Advisory Council

Analytic Sections



Actuarial Model, Example Table 1

Table 1. SB 600 Impacts on Benefit Coverage, Utilization, and Cost, 2020

	Baseline	Postmandate	Increase/ Decrease	Percentage Change
Benefit coverage				
Total enrollees with health insurance subject to state-level benefit mandates (a)	24,490,000	24,490,000	0	0%
Total enrollees with health insurance subject to SB 600	16,899,000	16,899,000	0	0%
Percentage of enrollees with health insurance subject to SB 600	69%	69%	0	0%
Number of enrollees with fertility preservation coverage fully compliant with SB 600	158,992	16,899,000	16,740,008	10,529%
Percentage of enrollees with fertility preservation coverage fully compliant SB 600	0.94%	100%	99%	10,529%
Utilization and unit cost				
Number of enrollees of child-bearing age with cancer diagnosis where treatment might result in iatrogenic infertility				
Male	2,553	2,553	0	0%
Female	3,799	3,799	0	0%
Total	6,352	6,352	0	0%
Number of enrollees with cancer using cryopreservation covered by insurance				
Embryo	2	227	225	11,955%
Mature oocyte	16	734	718	4,601%
Sperm	17	792	775	4,650%
Number of enrollees with cancer using cryopreservation not covered by insurance				
Embryo	102	0	-102	-100%
Mature oocyte	326	0	-326	-100%
Sperm	639	0	-639	-100%
Average cost per cryopreservation procedure				
Embryo	\$11,254	\$11,254	0	0%
Mature oocyte	\$10,078	\$10,078	0	0%
Sperm	\$468	\$468	0	0%
Expenditures				
Premiums by payer				
Private employers for group insurance	\$86,438,375,000	\$86,444,142,000	\$5,767,000	0.0067%
CalPERS HMO employer expenditures (c) (b)	\$3,098,551,000	\$3,098,822,000	\$271,000	0.0087%
Medi-Cal Managed Care Plan expenditures	\$28,492,273,000	\$28,492,273,000	\$0	0.0000%

How Analyses are Completed

- Analytic methods (http://chbrp.org/analysis_methodology/index.php)
- Templates/ guidance documents
- Detailed timeline
- Communication

Analysis of California Assembly/Senate Bill #

BACKGROUND ON

TEST/TREATMENT/SERVICE/CONDITION/DISEASE

The background section should provide broad, contextual information about the disease/condition/provider/intervention, regardless of health insurance while the PH section only describes specific changes attributable to the proposed mandate.

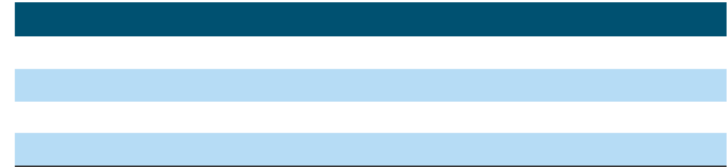
Insert paragraph(s) describing the subject of the bill (i.e., disease/condition/provider/intervention). This may include the history of the disease/condition, a basic clinical description or characteristics, and/or causes of disease. Review of applicable treatments should be decided by the bill team (ME and PH). List any limitations to the scope of what is considered part of the disease or condition for the purposes of the analysis!

Name of Disease/Condition Prevalence in California

Present information about the incidence/prevalence of the disease or condition and, when agreed to by bill team, the use of treatment or intervention overall. Prevalence rates are generally presented in table form, by demographic characteristics (i.e., race/ethnicity, age, gender, income, etc.), preceded by a short summary of findings. This section notes differences and reserves the disparities discussion for the next section. Disparities cannot necessarily be discerned by prevalence rates alone (which may be unadjusted and/or not statistically significant).

The following table describes the prevalence of x by key demographic characteristics (e.g., race/ethnicity, age, gender, income, etc.).

Table 1. Prevalence of Disease/Condition by Key Demographic Characteristics, year



Source: California Health Benefits Review Program, 2020.

Note: This would be a general note that applies to the entire table.

* Use an asterisk (*) without parentheses if only one such note is needed. In the table, the asterisk is set closed (i.e., no space between the symbol and the text), but in the table notes, there is a space separating it from the following text.

(a) This would indicate a note applicable to a certain line in a table with more than one such note. Use lowercase letters (i.e., (a), (b), (c)) with parentheses. In the table, use a space before to separate it from the text; in the note in the table footer, use a space after. Do not use numbers for notes, as they could be confused with main-text footnotes.

Key: Define all acronyms and abbreviations here (not in the table), even if defined elsewhere, and set in alphabetical order, e.g., CDI = California Department of Insurance; DMHC = Department of Managed Health Care; HMO = health maintenance organization.

Key Takeaways

In order to complete analyses within 60 days, CHBRP:

- Has existing contracts with faculty and researchers across the UC system
- Clearly defines section content and methods
- Provides tools to complete actions quickly

California Health Benefits Review Program

Resources for Faculty and Students

Ana Ashby
Policy Analyst

CHBRP CAN SUPPORT FACULTY AND STUDENTS THROUGH:

- Guest lectures on current policy topics
- Analyses, resources, and other products
- Internships and assistantships

GUEST LECTURES

- UCSD Example: Independent Study in Health Policy
- Possible topics:
 - Health Insurance in California 101
 - Test/Treatments/Services that have interested the Legislature
 - Components to independent analyses
 - Real-world uses for literature reviews



ANALYSES, RESOURCES, AND OTHER PRODUCTS



Type to begin searching

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Recent Presentations

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Date	Topic	Event
2019		
September 13, 2019	Review of 2019-2020 California State Budget	CHBRP Faculty Task Force Meeting
February 6, 2019	2019 CHBRP Annual Legislative Briefing Presentations	CHBRP Legislative Briefing

Resource:
Health Insurance Benefit Mandates in California State and Federal Law

January 2, 2019

California Health Benefits Review Program

Issue Brief:
[Estimates of Sources of Health Insurance in California for 2020](#)

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SUMMER INTERNSHIPS



- Master's or Doctoral candidates
- 40 hours per week, paid
- Bill tracking
- Regulatory updates
- Stakeholder meetings
- Independent projects



ASSISTANTSHIPS

- Graduate/undergraduate students
- 15-20 hours per week, paid
- Bill tracking
- Social media updates
- Stakeholder meetings
- Administrative Support



Questions? Want more info?
www.chbrp.org

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