California Health Benefits Review Program

Providing the State Legislature independent analyses of health insurance benefit mandate or repeal bills

January 19, 2012



Plan for the Day

- > Health insurance benefit mandates
 - What do we mean by "insurance mandates?"
 - Who regulates health insurance?
- ➤ Overview of The California Health Benefits Review Program (CHBRP)
- > Legislative process for benefit mandates
- ➤ Health Reform— Interactions with EHBs
- ➤ Overview of CHBRP's analytic methods, with examples (ME, Cost, and PH)

California Health Benefits Review Program

Overview

Garen Corbett, MS Director, California Health Benefits Review Program University of California, Office of the President

> California State Legislature January 19, 2012



Outline

- > Health insurance benefit mandates
 - Insurance regulation in California
 - What are benefit mandates
 - Populations affected by state-level insurance regulations (and thereby, mandates)

- > CHBRP overview
 - Structure
 - 60-day process
 - Products



CA Health Insurance Regulation

Two health insurance regulators in California, written in two sets of codes



CA Health Insurance Regulators

➤ **DMHC** - CA Department of Managed Health Care enforces the CA Health and Safety Code





CA Health Insurance Regulators

> CDI - CA Department of Insurance enforces the CA Insurance Code





CA Health Insurance Regulators

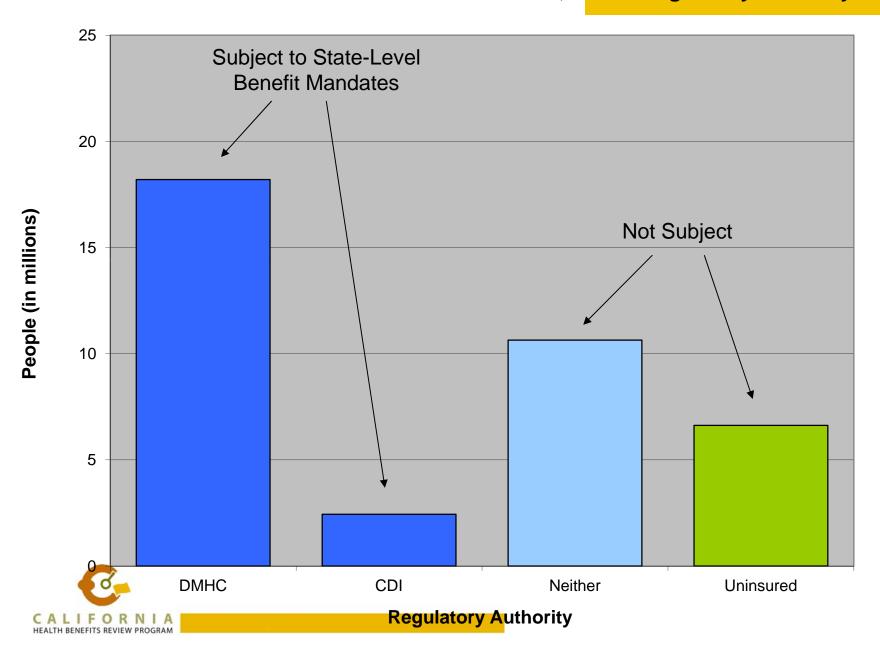
OTHER - Federal and/or other State-Level Department



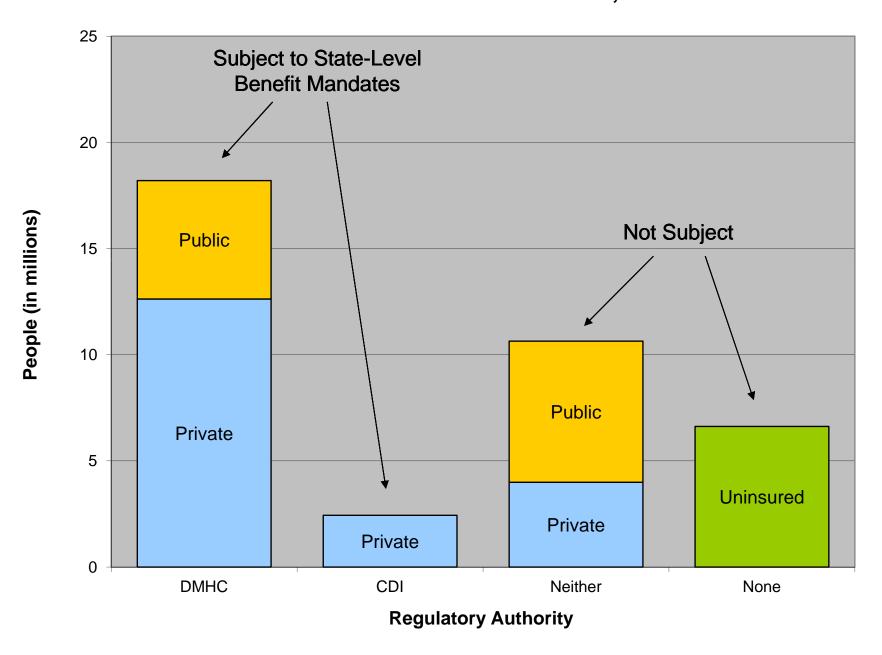




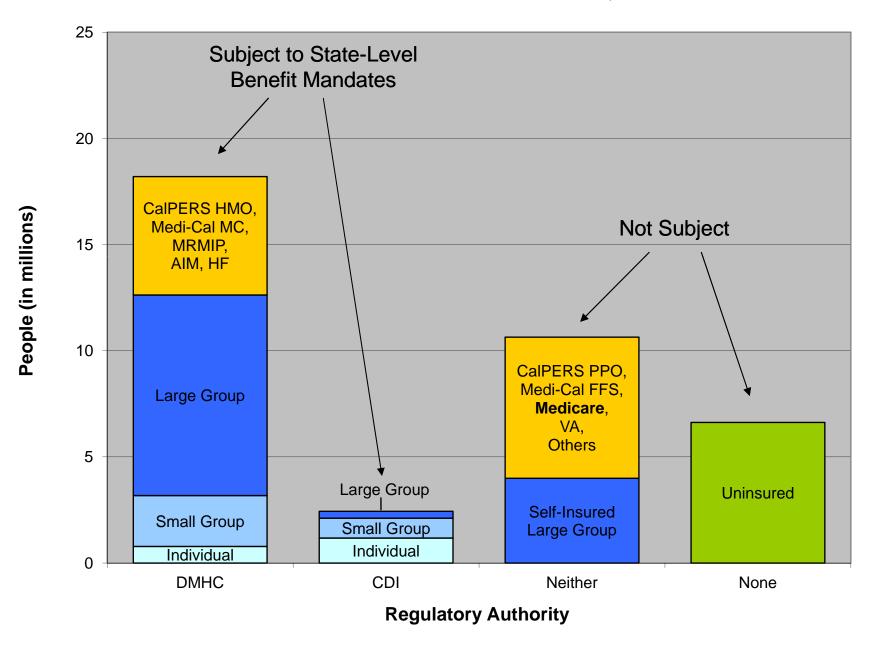
Sources of Health Insurance in California, 2011 – Regulatory Authority



Sources of Health Insurance in California, 2011 – Public/Private



Sources of Health Insurance in California, 2011 – Detailed View



Mandate types

Туре	Examples
Coverage for a set of services to screen, diagnose, or treat a disease or condition	 AB 1825 (2010) Maternity services AB 213 (2005) Treatment of lymphedema
Coverage for a specific <u>item or service</u>	SB 1223 (2006) Hearing aids for childrenSB 158 (2009) HPV vaccination
Reimbursement for services provided by a specific <u>provider</u> type	• AB 1927 (2004) Vision services [reimbursement for optometrist services]
SUBSET: changes terms and conditions that a benefit may be provided	 AB 2012 (2006) Orthotics and prosthetic services SB 1198 (2008) Durable medical equipment



Outline

- > Health insurance benefit mandates
 - Regulatory framework
 - Populations affected by state-level insurance regulations
- > CHBRP overview
 - Structure
 - 60-day process
 - Products



What is CHBRP?

- ➤ A program administered by the University of California, but institutionally independent
- Created by law to provide timely, independent, evidence-based information to the Legislature to assist in decision-making
- Charged to analyze medical effectiveness, cost, and public health impacts of health insurance benefit mandates or repeals
- ➤ Requested to complete each analysis within 60 days without bias or policy recommendations



Who are we?

- ➤ Task Force of faculty and researchers
- ➤ Actuarial firm: Milliman, Inc
- **>** Librarians
- ➤ Content Experts
- ➤ National Advisory Council
- > CHBRP Staff

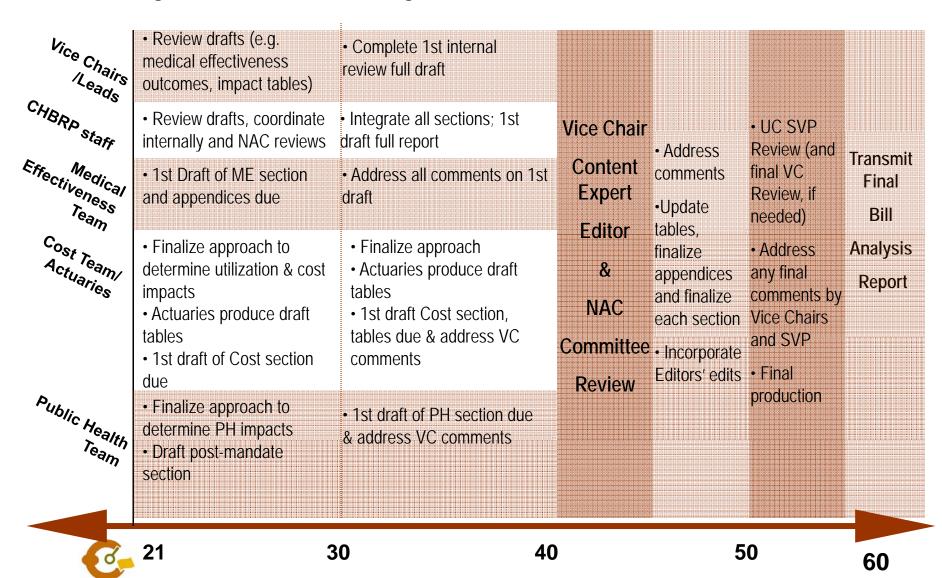




60-Day Timeline: Days 0-20

Vi _{ce} Ch _{airs} /L _{eads}	Determine scope of services	Review drafts (e.g. bibliography, baseline tables)
CHBRP Staff	Receive request; post on web siteClarify intent of bill in writing (work w/bill author)Send out CHBRP coverage survey	 Compile carrier coverage data and Compile info from the interested parties Compile coverage info for public programs
Effectiveness Librarians	Librarians conduct literature search under direction of effectiveness team	 Librarians prepare final abstract database Team analyzes literature & prepares draft medical outcomes summary tables
C _{Ost} Te _{am/} Act _{uaries}	utilization	 Develop baseline coverage, utilization tables. Review evidence for projecting impacts (utilization assumptions, cost offsets, long-term impacts)
Public Health Team	Conduct literature search for PH analysis (e.g. prevalence, racial disparities)	Develop baseline tables for public health and review evidence to for projecting impacts on subpopulations
8	0	10 20

60-Day Timeline: Days 21-60



17

CHBRP Report

- Executive Summary
 - Bill summary
 - Medical effectiveness results (outcomes)
 - Coverage, utilization, and cost estimates (Table 1)
 - Public health impacts (health of community, disparities, productivity)
- ➤ Main Report: organized into three analytic sections
- > Appendices
 - Details of literature search methods and findings
 - Limitations and assumptions of cost model
 - Information submitted by outside parties



What have we done?

- ➤ 82 Reports or Issue Analyses, 14 Letters since 2004
- > Two major implementation reports
- > Journal articles
- > Briefings and workshops with legislative staff, public



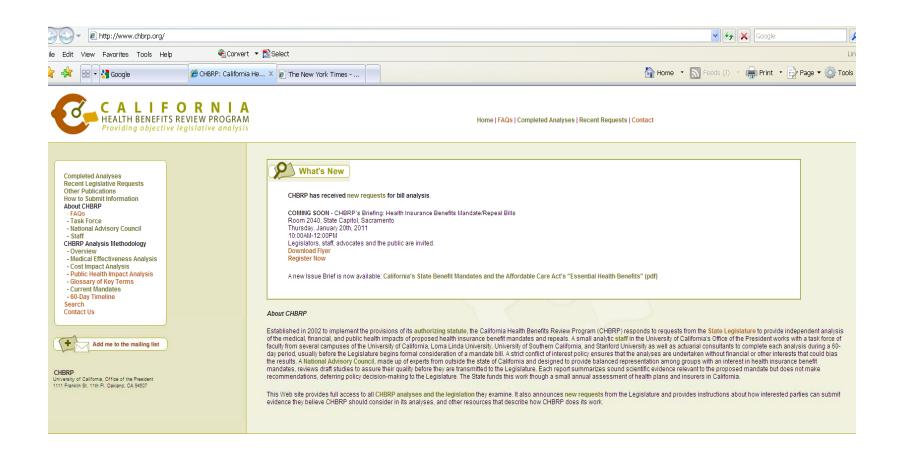
CHBRP Reports

- > Acupuncture
- Alzheimer's disease drugs
- Asthma management
- Autism treatments
- Breast cancer screening
- Chiropractic care
- Hearing aids for children
- > High deductible health plans
- > HPV screening and vaccine
- Inborn errors of metabolism treatment
- Lactation consultation
- Lymphedema treatments

- Mastectomies and lymph node dissection
- Maternity services
- Mental health services
- Orthotic and prosthetic devices
- Osteoporosis screening
- > Ovarian cancer screening
- Propofol for colonoscopies
- Rheumatic disease drugs
- Substance disorder services
- Tobacco cessation services
- Transplant services for persons with HIV
- Vision services
- Waiver of mandates



www.chbrp.org





Legislative Process

- > Melanie Moreno, Senate Health Committee
- > Teri Boughton, Assembly Health Committee
- > Tim Conaghan, Senate Republican Caucus

