Public Health (PH)

Stephanie McLeod, MPP Candidate 2012
Graduate Health Policy Intern,
California Health Benefits Review Program
University of California, Office of the President

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- ➤ Health insurance benefits generally involve screening, diagnosis, and/or treatment of a condition or disease.
- >PH Team estimates impacts of
 - Health-related outcomes for enrollees with health insurance subject to the mandate
 - Societal outcomes (relevant to all Californians) resulting from the impact of mandated benefit on specified population.

PH – Enrollee Impacts

Health-related outcomes (for enrollees with health insurance subject to the mandate)

- Rates of:
 - Illness
 - Injury
 - Disability
 - Death
- Financial burdens



PH – Societal Impacts

Societal impacts (relevant to all Californians)

- Disparities between genders and/or races
- Rates of employee/student absenteeism
- Increased productivity associated with effective treatments
- Potential reduction of public costs



PH - Sources

- > ME Team conclusions
 - Medical effectiveness of services relevant to proposed mandate
- > BCCU Team conclusions
 - Changes in
 - Benefit coverage
 - Utilization of services that are relevant to the proposed mandate
 - Costs



PH - Sources

- ➤ Datasets
 - CA Health Interview Survey
 - CA Behavioral Risk Factor Survey
 - WONDER database (CDC)
- Published or documented information (peer-reviewed and/or grey literature)
- > Expert Opinion



Public Health Impacts

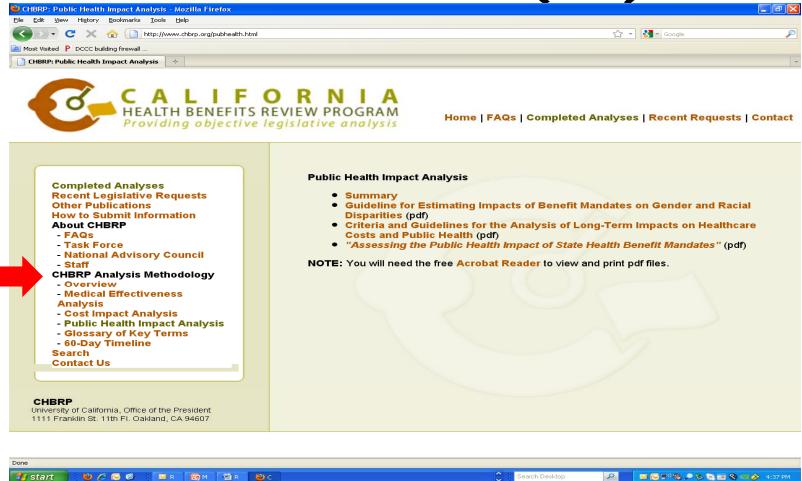
- CHBRP estimates that due to clear and convincing evidence of effectiveness of smoking
 cessation treatments and increased enrollee coverage, SB 136 would produce a positive
 public health impact by increasing the number of successful quitters by 2,364 enrollees
 annually. This would translate into real, improved health outcomes for these new quitters in
 the long term. Furthermore, literature indicates that the additional quitters enabled by SB 136
 would reduce harms from secondhand smoke postmandate.
- CHRBP estimates that, for the overall population, any cost increase or physical harms from rare serious adverse events from pharmacotherapy would be outweighed by the benefits of smoking cessation.
- Due to lack of data, CHBRP cannot quantify the impact of SB 136 on reducing existing gender disparities in smoking prevalence nor on the relevant health outcomes in the insured population. Therefore, the impact of SB 136 on reducing gender disparities is unknown.
- Due to lack of data, CHBRP cannot quantify the impact of SB 136 on reducing racial/ethnic disparities in smoking prevalence nor on the relevant health outcomes in the insured population. Therefore, the impact of SB 136 on reducing racial/ethnic disparities is unknown.
- There is clear and convincing evidence that SB 136 would contribute to the reduction in
 premature death from smoking-related conditions such as cancer, low birth weight infants,
 and cardiovascular and respiratory diseases. However, CHBRP cannot estimate the precise
 magnitude.
- CHBRP estimates that SB 136 would increase utilization of smoking cessation treatments
 and increase quit rates postmandate. This increase would contribute to a reduction in
 economic loss due to reductions in lost productivity from smoking-related illness and
 premature death, but the magnitude cannot be estimated.
- CHBRP finds clear and convincing evidence that smoking cessation is a cost-effective
 preventive treatment that results in improvements in long-term in multiple health outcomes
 and reduces both direct medical costs and indirect costs associated with smoking. CHBRP
 estimates between 16,548 to 29,314 life years would be gained annually under the new
 mandate. The expected reduction in smoking prevalence and mortality attributable to SB 136
 would bring California closer to achieving Healthy People 2020 goals.

Potential Effects of the Federal Affordable Care Act

The federal "Patient Protection and Affordable Care Act" (P.L.111-148) and the "Health Care and Education Reconciliation Act" (H.R.4872) were enacted in March 2010. These laws (together referred to as the "Affordable Care Act [ACA]") are expected to dramatically affect the California health insurance market and its regulatory environment, with most changes becoming

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California Health Benefits Review Program

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

Q & A

