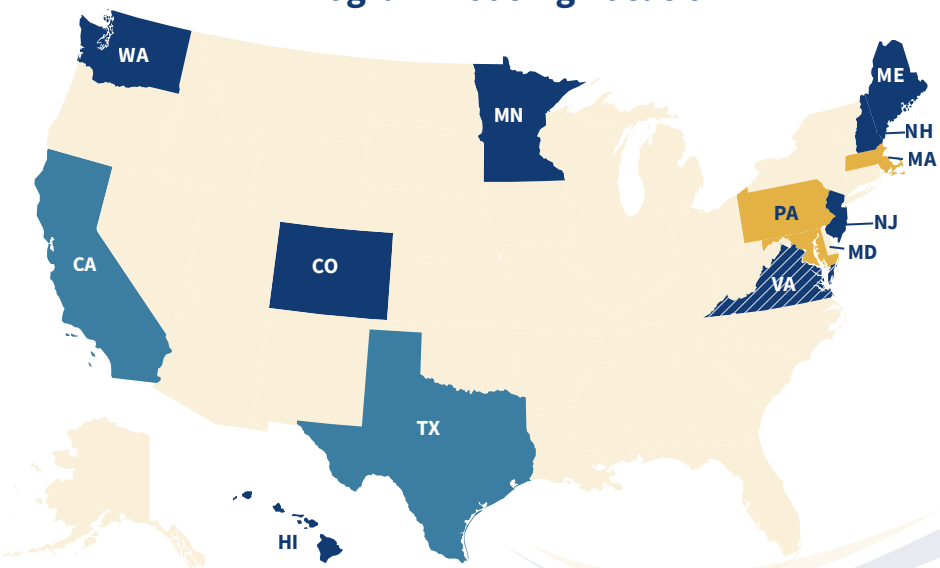
State Health Benefit Mandate Review Programs

HEALTH CARE NUTS AND BOLTS with CHBRP

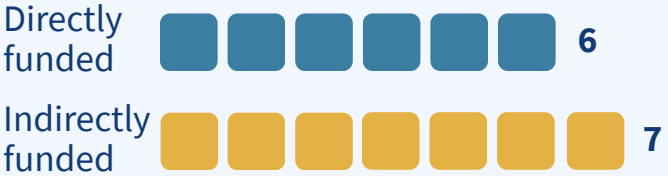
Including CHBRP, **13 programs** nationwide provide state legislatures with independent analysis of health **insurance benefit-related legislation**. In fall 2025, CHBRP conducted a national scan of these programs. The following compares how these programs are structured and how they complete their analyses.

Program Housing Location



- State agency
- University
- Independent state program
- Legislative commission

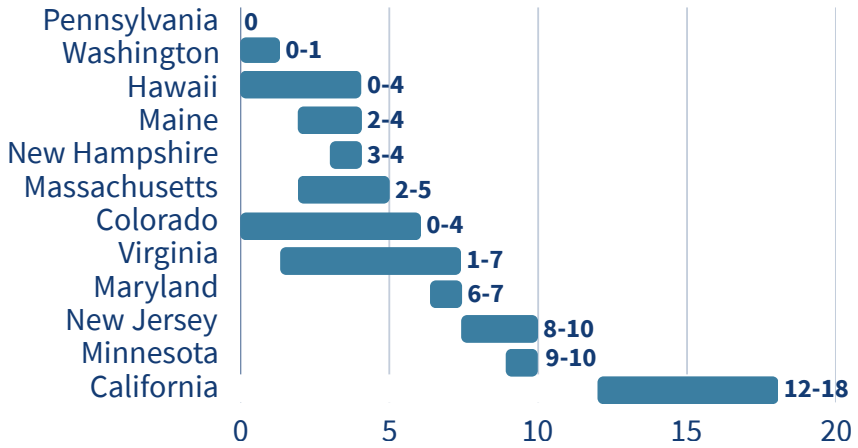
How Benefit Mandate Reviews Are Funded (n=13)



Funding sources for programs vary. Some programs receive **direct funding** for mandate review work, through legislative appropriations or assessments on health insurers dedicated to that purpose. Others receive funding **indirectly**: the state agency or independent program receives general funding from the legislature or through assessments, but no specific budget is allocated to mandate review work.

All identified programs receive **analysis requests** from the state legislature, though the authority to request varies within each legislature — in most states, legislative leadership or committee chairs make the determination, while Hawaii requires a concurrent resolution from both chambers. In Colorado, Minnesota, and Washington, committees collect **potential proposals** and determine which are sent for analysis.

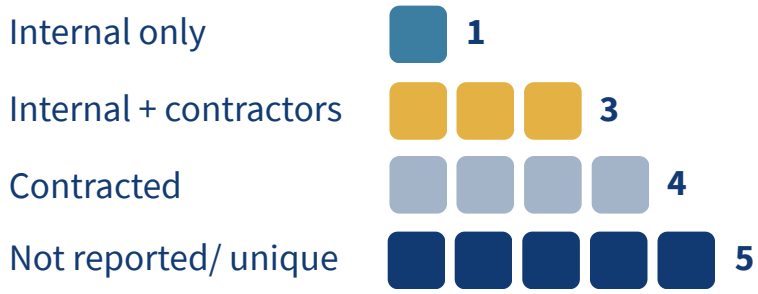
Analyses Per Year*



*Texas excluded because analyses will be completed beginning with the 2027 legislative season.

Staffing arrangements vary, although most programs use contractors in some capacity by either, either **fully outsourcing analyses** or pairing internal staff with **contracted support.**

How Programs Are Staffed (n=13)



How Much Time Programs Have

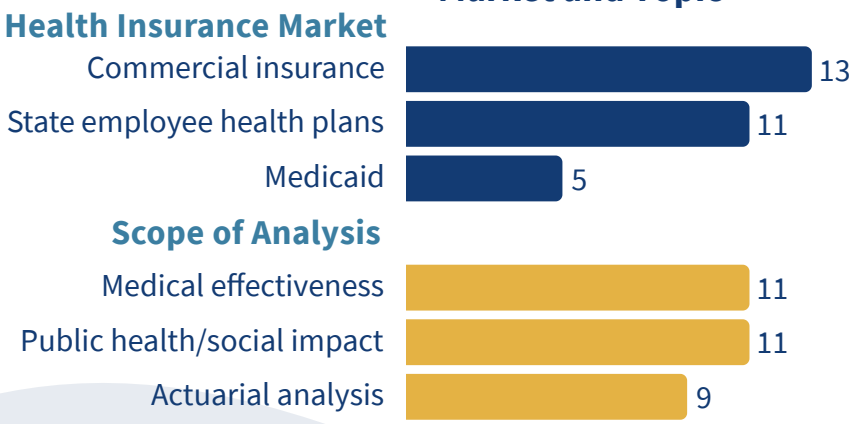
Specified deadline (generally under 3 months)

No specified timeframe (may still have request timelines)

Programs are roughly split on **timing**: half work within a specified deadline, generally under three months (with the exception of Minnesota), while the other half have no set timeframe for completing the analysis — though a **deadline may still apply** to when the request is sent or the analysis is delivered.

Scope of analysis varies across programs. All programs analyze impacts on **state-regulated commercial health insurance**, and most extend this analysis to state employee health plans (11), while fewer than half of programs provide analysis of Medicaid impacts (5). Almost all programs analyze medical effectiveness (11) and public health or social impact (11). Actuarial analysis is somewhat less common (9).

What Programs Analyze, by Market and Topic



There is **no single model** for state benefit mandate review — programs vary in where they are housed, how they are funded, and how they carry out their analyses. Despite these differences, **most programs share common features**: requests originate from legislative leadership, contractors are used to help complete the work, and analyses remain nonpartisan. As more states consider health insurance benefit mandate legislation, this range of models offers a reference point for states building or refining their own programs.

Want to learn more? Read the full issue brief at **chbrp.org**!

Data sources linked in the issue brief.

Last updated September 2026.