See what's happening with the California Health Benefits Review Program!



Letter from the Director

Greetings! Welcome to CHBRP's Winter Quarterly Newsletter.

I hope that all of our readers had an enjoyable conclusion of 2019 and a smooth start to 2020. It is already a very busy start to 2020 for the thousands of people involved in the policymaking process here in California. The long hours of research, analysis, and drafting of legislation, and tremendous engagement by policymakers, legislators, staff, and stakeholders is a remarkable undertaking in and of



itself. However, the second year of the two-year session offers additional deadlines and compressed timelines (and need for caffeine) for those working on legislation from the first year of the session as well as newly introduced bills. CHBRP, too has jumped into the New Year with two new analytic requests from the Legislature: SB 854 Substance Use Disorders and SB 855 Mental Health Parity. Our teams are hard at work and the reports will be released in March (more details below).

In order to jump into these analyses, CHBRP staff have been working hard to be ready. We update our materials, including publicly available documents and internal templates used to generate the reports. We also work with our faculty and actuary to prepare our actuarial model that supports our detailed financial projections that we provide in our reports. CHBRP reviews and seeks to improve all materials used in the process of an analysis to ensure the information and approach is up to date and provides the legislature and stakeholders with the best information possible. This process includes speaking to many stakeholders during the summer to hear their feedback, and gathering our researchers and faculty during the fall. CHBRP held its last meeting with its Task Force Members in November at our annual Cost team meeting, where we reviewed various approaches to the cost impact analysis with our economists and actuaries.

As legislative activity ramps up for this coming legislative season, CHBRP is monitoring health insurance related bills, not only for ones that may be referred to CHBRP, but for other legislation that may impact health insurance in California. We look forward to providing evidence-based and unbiased information to support the policymaking process, and know that our nights "burning the midnight oil" in the coming weeks will be in good company with many of you.

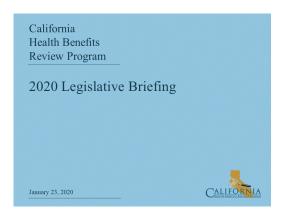
CHBRP Student Assistants

We are so thankful for the continued work of our student assistants. Daryl Mangosing, MPH, completed his time with us in December as he prepares to delve further into his DrPH studies. We're grateful for all of his work!

We're pleased to share that our other two student assistants from the fall, Liliane Nienstedt and Sabrina Woll, will be continuing on with us this Spring.

CHBRP's Legislative Briefing - Recap

Last Thursday, January 23, CHBRP hosted its annual Legislative Briefing in Sacramento. There, about 40 attendees from legislative offices, state agencies, health plans, and more received an overview of health insurance in California, CHBRP's charge and structure, and our analytic process, using the example of AB 767 (2019) Infertility. If you would like to review the PowerPoint slides from our presentations, please visit our website. Thank you to those of you who were able to attend!



2020 Requested Analyses

CHBRP has been requested to analyze two bills as of January 29, 2020. Recent requests and the bill language CHBRP will be analyzing are available at http://chbrp.com/recent requests/index.php.

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 the request. Information can be submitted to info@chbrp.org.

Recent Requests	Date Requested	Date Analysis Delivered to Legislature
SB 854 (Beall) Substance Use Disorder	1/15/2020	3/15/2020
SB 855 (Wiener) Mental Health Parity	1/15/2020	3/15/2020

Newly Released and Updated Resources

CHBRP is pleased to have released these recent resources:

- "California's State Benefit Mandates and the Affordable Care Act's
 Essential Health Benefits: An Update and Overview of New Federal
 Regulations." This issue brief provides background on EHBs in California and
 how they interact with current and proposed state benefit mandates. This brief
 also describes recent changes to federal EHB regulations and discusses
 California's options for modifying the selected set of EHBs for 2022. Special
 thanks to CHBRP's summer intern Jeffrey Rollman for his work on this brief.
- "Health Insurance Benefit Mandates in State and Federal Law." This annual resource lists the health insurance benefit mandates in current law known to CHBRP.
- CHBRP's 2019 Implementation Report. This report documents implementation of CHBRP's most recent reauthorization, for years 2017 through 2019.

Forthcoming resources include:

- "Federal Preventive Services Mandate and California Mandates." This
 annually updated resource identifies potential overlap between the federal
 benefit mandate requiring health insurance coverage of some preventive
 services and California state benefit mandates.
- Pharmacy Benefit Managers (PBMs). This forthcoming resource provides a
 history of PBMs, an overview of how they operate in the US, and relevant
 state and federal legislation.

All of these documents are available at http://chbrp.com/other-publications/index.php#.

Internship Reminder

CHBRP is searching for candidates for our 2020 Graduate Summer Internship. This paid internship provides graduate students with lots of opportunities to learn about health insurance policy in California, and to meet with CHBRP's stakeholders. If you or someone you know is interested in learning more, please visit the <u>internship page on our website</u> for more information. **Applications are due on February 1, 2020.**





Dr. Michelle Ko serves as an Assistant Professor in the Division of Health Policy and Management at UC Davis, where she is able to combine her passion for research, teaching and public service. Her research interests are quite broad, but the thread that links together most of her work is her passion for addressing health disparities and access to care for marginalized populations.

Dr. Ko received her medical degree at the University of California Los Angeles/Charles R. Drew University Medical Education Program, a program that focuses on training leaders to advance medical practice and knowledge in underserved areas. During her time at school she worked with underserved populations in South Los Angeles. As she notes, it was this early exposure to the different levels at which inequities played out in the healthcare system that made her want to turn her focus on structural policy issues in healthcare. She went on to pursue a PhD from UCLA's Fielding School of Public Health, which she received in 2012.

Currently, Dr. Ko works with the UC Davis Center for Diverse Health Care Workforce and researchers from a consortium of 34 medical schools organized by the American Medical Association to look at the extent to which graduates work with underserved communities. Additionally, she recently completed a qualitative study interviewing primary care physicians about their experiences serving communities in the San Joaquin Valley.

Being a faculty member at UC Davis has also allowed Dr. Ko to work directly on issues of diversity within higher education. What she finds most inspiring about her work are her students - many of whom are first generation students, from disadvantaged backgrounds and historically marginalized communities. She finds it rewarding to be able to introduce them to work in health policy and health services research, as well as supporting them as their interests in the field grow and develop. She founded and directs a program to provide undergraduates with a summer mentored research experience in public health, and serves as a faculty advisory for students in Davis' Program In Medical Education (PRIME), which focuses on training physicians to meet the medical needs of underserved communities across California.

At CHBRP, Dr. Ko serves as a Cost Team Lead. She finds it rewarding to be able to contribute to the legislative process. "It really is a privilege to be in a position where policymakers are directly asking you for your expertise," Dr. Ko notes.

In her career, Dr. Ko is most proud of the work she has done with students: "I want to advance change on the research side, but I also feel we critically need to change the access that people in our country have to gain leadership roles and effect change in health care and in politics," Dr. Ko says. "I am proud of being able to help students from underserved communities achieve their goals of becoming leaders in the health professions."



Dr. McMenamin is an assistant professor in the Division of Health Policy in UCSD's Department of Family Medicine and Public Health, and she also conducts research on health insurance coverage for tobacco cessation treatments. Her work played a significant role in drafting requirements for insurance coverage for tobacco cessation treatments that was used in the Affordable Care Act and she has continued to examine how the ACA impacts Medicaid coverage for treating tobacco dependence. Dr. McMenamin loves working with undergraduates at UCSD and giving them an idea of what the health policy-making process is all about. Many of her students

have had no prior exposure to this field, and she finds it extremely rewarding to have a student tell her that they want to pursue a career in health policy after taking her class.

Dr. McMenamin first became involved in health policy at UC Berkeley as an MPH student in Health Policy and Management. She majored in Public Health as an undergraduate at The Johns Hopkins University and has always been interested in health policy. She immediately got involved in work involving health insurance policy and has been with CHBRP for the last 16 years-since the very beginning-and is now the Vice Chair for Medical Effectiveness and Public Health. Her team handles both the medical effectiveness and public health sections of CHBRP's reports, and she supervises a team of analysts who work on the reports as well as writes many reports herself. Dr. McMenamin finds working with CHBRP to be unique and exciting as her work and results are consumed immediately, which is quite different to the other types of academic work that she is involved in where from the time a research question is developed to the time those results are used to make changes can sometimes be several years.

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