



See What's Happening With The California Health Benefits Review Program!

See What's
New



Academic Rigor On A Legislature's Timeline

Letter From The Director

Greetings! Welcome to CHBRP's Spring Quarterly Newsletter.

I hope that all of our readers are well. We are in the season that offers new possibility, and the stunning wildflowers and green hillsides in Northern California at this time of year always feels heartening and invigorating. Our COVID-19 case counts and hospitalization rates have trended favorably, and the long winter of the pandemic seems to be letting up (fingers crossed) in our corner of the world. We all have navigated through some extraordinarily difficult times and it is a lot to process.



The start of our two year legislative season has delivered a significant amount of health-related bill topics. CHBRP has completed and submitted 19 analyses in the past 10 weeks or so. We delivered reports on complex and important topics that reflect the times we live in. CHBRP's analyses ranged from the broad health financing changes (AB 1400) and expansion of coverage

analyses ranged from the broad health financing changes (AB 1400) and expansion of coverage options (AB 570), to telehealth (AB 32), affordability of insulin (AB 97 and SB 473), and deductibles for prescription medications that manage chronic diseases (SB 568). CHBRP analyzed a bill expanding Adverse Childhood Experiences Screenings (SB 428), coverage for expanded STD Testing (SB 306), Contraceptives (SB 523), cost-sharing-related bills, and many more. A reminder to all that all of our work may be accessed at our website, www.chbrp.org.

I am deeply appreciative of CHBRP's staff, faculty, and other Task Force members and actuaries who have stayed up late into many nights completing CHBRP assignments. In addition, our National Advisory Council spent many nights and weekends providing critical reviews of our draft reports, which are instrumental in delivering clear and accurate reports in the very limited time we have.

Looking towards the summer and fall, we hope to reconvene in-person when or where possible, with caution and following all University and local requirements. But, for the next few months at least, we will continue to defer most in-person meetings. CHBRP will be holding multiple virtual meetings to engage our contributors and assemble workgroups over the summer and fall months. CHBRP staff would also usually be organizing summer meetings with our stakeholders, including health plan representatives, agency and legislative staff, and consumer groups. These meetings will also most likely still be held primarily virtually.

I wish you all well and I hope that everyone enjoys some time outdoors. We appreciate your continued interest in our work.

Until next time,
Garen



Analyses Completed in 2021

So far in 2021, the Legislature requested that CHBRP analyze 19 bills.

- AB 32 Telehealth
- AB 97 Insulin Affordability
- AB 114 Medi-Cal Benefits: Rapid Whole Genome Sequencing
- AB 570 Dependent Parent Health Care Coverage
- AB 935 Telehealth: Mental Health
- AB 1254 Mobile Stroke Units
- AB 1400 Guaranteed Health Care for All
- AB 1520 Prostate Cancer: Screening
- SB 110 Substance Use Disorder Services: Contingency Management Services
- SB 245 Abortion Services: Cost Sharing
- SB 306 Health Care: STD Testing

- SB 360 Health Care: STB Testing
- SB 428 Adverse Childhood Experiences Screenings
- SB 473 Insulin Cost Sharing
- SB 510 COVID-19 Cost Sharing
- SB 523 Contraceptives
- SB 535 Biomarker Testing
- SB 562 Autism
- SB 568 Deductibles: Chronic Disease Management
- SB 613 Maternal Health: Neonate Medical Wrap

All completed analyses are available on CHBRP's website.

As these bills move through Committees, CHBRP publishes an "Amendments Update" document ahead of key hearings that will indicate the portions of CHBRP analyses that remain relevant after amendments are made to analyzed bills. This will be available on CHBRP's website and CHBRP will also notify readers when a new version is posted via our email listserv.

Completed Analyses

Recent Presentations

Testimony on Current State of the Evidence on Telehealth to the Assembly Health Committee

CHBRP was pleased to provide a [background brief on Telehealth](#) and provide testimony during an Assembly Health Committee Informational hearing in February on the current state of the evidence on telehealth. All presentations and materials are available on the [Assembly Health Committee's webpage](#).

CHBRP's Legislative Briefing

CHBRP held its annual Legislative Briefing in February 2021. CHBRP staff discussed the analytic approach CHBRP uses and demonstrated how CHBRP serves as a bridge between academia and the policy-making process within the Legislature's fast timeline.

WHO IS CHBRP?

- CHBRP Staff (based at UC Berkeley)
- Contract CHBRP Leads
- Task Force of faculty and researchers
- Actuarial firm: Milliman, Inc.
- Librarians
- National Advisory Council
- Content Experts
- Student Assistants
- Graduate Summer Interns



See CHBRP's Recent Presentations

Recently Published Resources

CHBRP has recently updated the following resources:

- Estimates of Sources of Health Insurance in 2022
- Estimates of Pharmacy Benefit Coverage in 2022

[View
Resources](#)



Task Force Spotlight

Each newsletter, CHBRP features two Task Force members and the important work they do outside of CHBRP. See more information about all of our Task Force members on CHBRP's website.

[CHBRP's Task Force](#)

Naomi Hillery, MPH

Naomi Hillery works as a field researcher at UCSD's Health Services Research Center in the Herbert Wertheim School of Public Health and Human Longevity Science. Her current projects mainly focus on researching tuberculosis diagnostics and evaluating substance use disorder treatment programs for San Diego County. She also works on various clinical trials.

Within CHBRP, Naomi primarily works on the Public Health team. She has led various public health sections of CHBRP's reports for the UCSD team, and she also often contributes work to the medical effectiveness sections of reports. Naomi greatly appreciates the academic experience of working with CHBRP, and finds it both interesting and rewarding to focus on a variety of topics, learn as much as possible about them, and synthesize her findings into concise reports. She also enjoys being able to work through this academic process with other colleagues on the CHBRP team.



Naomi first got involved in public health more generally as an undergraduate on the pre-nursing track with a minor in public health. She found herself particularly interested in research and wanted to know more about how it was conducted, how conclusions about public health could be drawn, and how findings from studying trends and populations could be applied to have wide-reaching impacts. Her role at UCSD's research center allowed her to broaden her skills and interests, leading her to expand into the field of health policy as a task force member at CHBRP. In her career so far, Naomi is most proud of her growth in the field of public health research and health policy, publishing peer-reviewed literature on her work, and mentoring colleagues at UCSD who are new to the field. Some experiences that have been the most rewarding include travelling to the Republic of Moldova to set up a tuberculosis research study and building interventions at

Joy Melnikow, MD, MPH

Joy Melnikow is the Director of the UC Davis Center for Healthcare Policy and Research (CHPR), an organized research unit whose mission is to foster interdisciplinary collaborative research related to health outcomes, access, cost, and quality, and to train the next generation of researchers in those areas. Dr. Melnikow has served as Director for eleven years while also acting as a Professor – and until recently, a physician – in the Department of Family and Community Medicine.



Dr. Melnikow has been interested in using evidence to inform and determine practice and policy for the entirety of her career, and this is what got her interested in academic medicine. As a physician for 29 years, she was able to use this to have a direct impact on the lives of her patients. She enjoys teaching because it allows her to share things that she's learned over the years in her approach to evidence-based medicine and research, and because it's an opportunity to support students who are in clinical training. Her favorite part of her work in research is collaborating with people who have different perspectives and methodologies to solve a problem. She sees this as central to her work at CHPR.

Dr. Melnikow's work has also been key to health insurance policy at the federal level; from 2009-2012, she served as a task force member on the US Preventive Services Task Force (USPSTF), which develops recommendations for clinical preventive services. She was also recently appointed to the US Community Preventive Services Task Force, where her work will contribute to recommendations on public health and community interventions to improve population-level health.

Since 2010, Dr. Melnikow has served as a Vice Chair of Medical Effectiveness and Public Health Impact for CHBRP. She appreciates the opportunity that CHBRP presents to have the synthesis of evidence utilized in real time in policy formulation and consideration. She also enjoys the opportunity to collaborate with staff and faculty from other UC campuses, and is proud of the clinical perspective that she and the UC Davis campus are able to bring to CHBRP's work.

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MC 3116

Berkeley, CA 94720-3116

(510) 664-5306

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