Greetings! Welcome to CHBRP's Summer Quarterly Newsletter.

It goes without saying that we are living in unprecedented times. We are now well over a year into what we all hope is a once-in-a-lifetime pandemic. Sadly, COVID-19 remains an existential threat. The Centers for Disease Control and Prevention recently noted that U.S. life expectancy experienced its largest one-year drop since World War II, fueled by COVID-19 deaths and opioid overdoses. Life expectancy at birth dropped by 1.5 years, bringing it down to 77.3 years. This fall in life expectancy was exacerbated by structural failures in the U.S. healthcare system. This is an astonishing setback.

So while we work towards reopening plans and contemplate the substantive policy and research imperatives facing us, the nature of our work life has also changed. Not only did the pandemic change the way we conduct our work, but it also taught us to leverage technology to effectively...
change the ways we conduct our work, but it also taught us to leverage technology to effectively continue our work. In some ways, it perhaps even enhanced our productivity. But unanswered questions remain, and how will these new work patterns impact creativity and workplace culture? I suspect many of us will be more virtual than in the past, and that this is probably a good thing. But we also have to adjust to this new normal in ways that allow for the creative sparks that emerge from face-to-face, in-person contact.

This past year has also shined a penetrating light on deep-seated issues stemming from systemic racism and how this impacts the ability of the health system to achieve the outcomes we so desire. We collectively need to better recognize the importance of diversity, equity, and inclusion. This consideration extends to health services research, the data we use, and our standards of practice. We'll likely have more to write on this topic in the months ahead.

CHBRP continues to track numerous pieces of legislation that we analyzed this spring (please see below). We continue fielding and responding to inquiries from the Legislature, stakeholders, and the media. We are about half-way through our annual stakeholder meetings with insurers, Agency staff, Legislative Committee consultants, and advocacy groups. We are constantly learning from the insights and feedback from the interested parties who read and leverage our work. We also are learning from a terrific cohort of students who are working with us this summer, and a new staff member!

While we're all interested in what comes next and putting the pandemic behind us, the future is inextricably tied to the past. Part of a strong new normal will require bringing what we've learned along with us to correct mistakes and re-envision a better, safe and, we might hope, saner world ahead.

Until next time,
Garen

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**Welcoming our 2021 Summer Interns**

We are so excited to welcome our 2021 Summer Interns: Victor Garibay, Chris Klene, and Katie Patrick. CHBRP is incredibly grateful to have them supporting our many summer projects.

**Victor Garibay** is a Health Career Connection Undergraduate Student Intern and in his fourth year of pursuing his undergraduate degree in Public Health and Public Policy at UC Berkeley. He has previously interned for multiple clinics in the Bay Area, including Clinics de La Raza and Clinic by the Bay, assisting with both administration and translation. With his communication and language skills, Victor contributes to the Volunteer Health Interpreters Organization, an undergraduate student-led organization dedicated to providing healthcare to underserved populations without language barriers.
Chris Klene is a Graduate Student Intern and an MPH student studying Health Policy & Management at the UCLA Fielding School of Public Health. Prior to beginning the MPH program, Chris was a Policy Specialist at the Center for Health Progress, where he analyzed bills at the Colorado state legislature, provided support for the Coalition for Immigrant Health, and contributed to the organization’s health systems transformation work. Chris holds a B.A. in Sociology from the University of Colorado Boulder.

Katie Patrick is a Graduate Student Intern and is currently finishing her final summer as an MPH student at UC Berkeley’s School of Public Health. This past year, Katie worked on two research teams focused on behavioral economics in healthcare and telemedicine in the wake of COVID-19, and she was a contributing author for publications on both research teams. Previously, Katie worked as a graduate student instructor and was the past president of the Cal Berkeley Triathlon Club. She is especially passionate about moving the needle in health policy to advance equity and access to care.

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**Welcoming our new staff member**

We are pleased to welcome our new staff member, Sabrina Woll. Sabrina has spent the past two years working with CHBRP as an Undergraduate Student Assistant, and CHBRP is excited to continue having her on board this year as a full-time Policy Associate.

Sabrina Woll was born and raised in Hong Kong, where she developed a passion for healthcare and different health systems through her experiences with traditional Chinese medicine. As a certified Emergency Medical Technician, she spent the past year volunteering at events offering free COVID-19 testing for the Bay Area’s unhoused and low-income population as well as assisting UC Berkeley’s University Health Services with COVID-19 vaccinations for students, faculty, and staff. Prior to joining CHBRP, Sabrina was an outreach coordinator for The Suitcase Clinic, a humanitarian student-led organization dedicated to alleviating homelessness throughout offering health and social services to local underserved populations. Sabrina holds a B.A. in Public Health and Public Policy from the University of California, Berkeley.

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**2021 Completed Analyses and Status**

In 2021, the Legislature requested that CHBRP analyze 19 bills. The following chart shows the status of these bills, with each column indicating where the bills are currently located.
The deadline for all bills to pass out of their house of origin was June 4, 2021, and the last day for any bill to be passed by the second house is September 10, 2021. The deadline for the Governor to sign or veto bills passed by the Legislature is October 10, 2021.

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 is available on CHBRP's website under Completed Analyses, and CHBRP will also notify readers when a new version is posted via our email listserv.

CHBRP Staff and Task Force Members at AcademyHealth

CHBRP staff and Task Force Members were pleased to present recent research at AcademyHealth's Annual Research Meeting in June 2021.

- Staff member Adara Citron and Task Force Member Riti Shimkhada presented findings from CHBRP's 2020 analysis of AB 2203 Insulin Cost-Sharing Caps
- Task Force Member Riti Shimkhada presented her poster, "Asian American Elders in Need: Low Levels of Life Satisfaction and Social and Emotional Support"
- Task Force Member and Medical Effectiveness Vice Chair Janet Coffman was the moderator and discussant during the session "State Level Perspectives on the Health Care Workforce"

See CHBRP's Recent Presentations
This summer, CHBRP is bidding farewell to two long serving Task Force Members, as well as welcoming in a new Vice Chair.

**Gerald Kominski, PhD**, is now Professor Emeritus and has retired from CHBRP. Dr. Kominski joined CHBRP in 2002 and was the co-creator of the Cost and Coverage Model (CHBRP's actuarial model), used to develop fiscal impact estimates for many of the analyses CHBRP conducts. His guidance and involvement with the Program over many years has been invaluable and we will miss his wisdom, insights, and humor. UCLA's Fielding School of Public Health published a profile of Dr. Kominski and included a link to the newly established Gerald F. Kominski Health Policy Fellowship.

**Min-Lin Fang, MLIS**, has retired from the UCSF Library after 26 years. Min-Lin was the first librarian CHBRP worked with to conduct literature reviews for the analyses and has been a valued and thoughtful team member since 2004. We will miss her diligence and desire to provide the most helpful information to CHBRP Task Force Members.

We wish Dr. Kominski and Min-Lin many happy days and fun travels ahead!

In other transitions, CHBRP's Medical Effectiveness and Public Health Vice Chair **Joy Melnikow, MD, MPH**, is also preparing to retire. Dr. Melnikow is stepping down as the director of the University of California, Davis, Center for Healthcare Policy and Research to serve as Professor Emeritus. Over the next year, she will share Vice Chair responsibilities with **Elizabeth Magnan, MD, PhD**, also of UC Davis, with the plan to step down as Vice Chair in the summer of 2022. CHBRP is grateful to have this time of transition and we look forward to this next year of joint leadership.

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**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.

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**Meghan Weyrich, MPH**

Meghan Weyrich is a Health Policy Research Analyst with the UC Davis Center for Healthcare Policy and Research. She manages research projects of varying scale and complexities, particularly in the areas of patient safety, quality measurement, and evidence-based practice. Currently, Ms. Weyrich serves as the Managing Editor for the Agency for Healthcare Research and Quality's (AHRQ) Patient Safety Network, which is the premier federal source for “all information about patient safety science.”
resource for disseminating information about improving patient safety and preventing medical errors. She collaborates with researchers at UC Davis and IMPAQ International to develop and maintain quality indicators for use in CMS payment programs. Additionally, she works with the Kaiser Permanente Evidence-based Practice Center to produce systematic evidence reviews for AHRQ that are used by the U.S. Preventive Services Task Force to update their clinical preventive service recommendations in primary care. When asked what has been most rewarding in her career, Ms. Weyrich noted that her favorite part of her job is seeing how evidence can inform healthcare delivery and health policy.

Ms. Weyrich also serves on CHBRP's Medical Effectiveness and Public Health Impact teams. She joined CHBRP when she started at the Center for Healthcare Policy and Research after she completed her MPH at Boston University. Ms. Weyrich enjoys working with CHBRP because she loves diving into new topics each year and working with intelligent and thoughtful people. Through her work with CHBRP, she has worked on an array of topics, from fertility preservation to continuous glucose monitors for diabetes.

Ms. Weyrich has always been interested in politics and policy, and her interest grew while at Boston University. She was completing her MPH program while the Affordable Care Act was being passed and, as a result, was immersed in health policy discussions in all of her classes. She feels fortunate to have found a role at UC Davis that has allowed her to continue working in health policy. In her career thus far, Ms. Weyrich is proud of her work that has directly supported and informed policymakers in their decision making. For instance, she spent the better part of two years working on a systematic review examining the benefits and harms of PSA testing for prostate cancer and prostate cancer treatments. Over 4,000 abstracts, 300 full-text papers, and one 200+ page report later, her hard work informed the US Preventive Services Task Force's recommendations regarding PSA testing. She has found it incredibly rewarding to see her hard work directly inform policy.

Michelle Keller, PhD, MPH

Dr. Michelle Keller is an Assistant Professor/Research Scientist of Medicine at Cedars-Sinai Medical Center, as well as an Adjunct Professor at the University of California, Los Angeles Fielding School of Public Health. Her research focuses on improving pain management for older adults, reducing low-value health care, facilitating patient-clinician communication, and using informatics to improve patient safety. Currently, Dr. Keller is evaluating patient-centered deprescribing interventions and policies for high-risk medications such as opioids, benzodiazepines, and sleep medications in older adults. At the Health Policy and Management Department at UCLA,
she teaches courses in cost-effectiveness analysis and health systems organization.

Within CHBRP's Task Force, Dr. Keller serves as a Cost Team Lead, and is responsible for preparing cost impact analyses for analyses. Dr. Keller finds its incredibly rewarding to work toward a common goal with a team of motivated, enthusiastic, and intellectually curious individuals. On a larger scale, she enjoys thinking through analytic approaches to help the California Legislature make informed decisions that ultimately impact millions of people and one of the world's largest economies. Lastly, Dr. Keller appreciates doing health policy work where she can see the impact in her day-to-day work.

Dr. Keller first became interested in health policy while working as a reporter for the Orlando Sentinel, the LA Times, and the Chicago Tribune. She went on to work for the Kaiser Family Foundation (KFF), serving as the editor for KFF's Health Reform website while the Affordable Care Act was being implemented. Following her time there, she earned an MPH and PhD in Health Policy and Management from the UCLA Fielding School of Public Health. In her career, Dr. Keller is most proud of working with mentees, ranging from high school students to graduate students, and following their careers.