
Overview of the California Health Benefits Review Program (CHBRP)

*Providing the State Legislature with
Independent Analysis*

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California State Legislature
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Outline for this Briefing

- Overview of CHBRP
- The Process for Benefit Mandates
- Health Insurance “101” - Primer
- Key components of the Affordable Care Act
- CHBRP’s Approach
 - Medical Effectiveness analysis approach
 - Benefit Coverage, Cost, Utilization analysis approach
 - Public Health analysis approach
- Q & A



What is CHBRP?

- A program administered by the University of California, but institutionally independent
- Created by law to provide timely, independent, evidence-based information to the Legislature to assist in decision-making
- Charged to analyze medical effectiveness, cost, and public health impacts of health insurance benefit mandates or repeals
- Requested to complete each analysis within 60 days without bias or policy recommendations



Who is CHBRP?

- Established in 2002
- Based at the University of California (UC)
- Task Force of faculty and researchers
- Actuarial firm: Milliman, Inc
- Librarians
- Content Experts
- National Advisory Council
- CHBRP Staff



What are Benefit Mandates?

- A Health Insurance Benefit Mandate is:
 - A requirement imposed on health insurance (whether publicly financed or privately financed) to cover specific benefits or alters terms and conditions of coverage

- Health Insurance Benefits:
 - Benefits are tests/treatments/services appropriate for one or more conditions/diseases

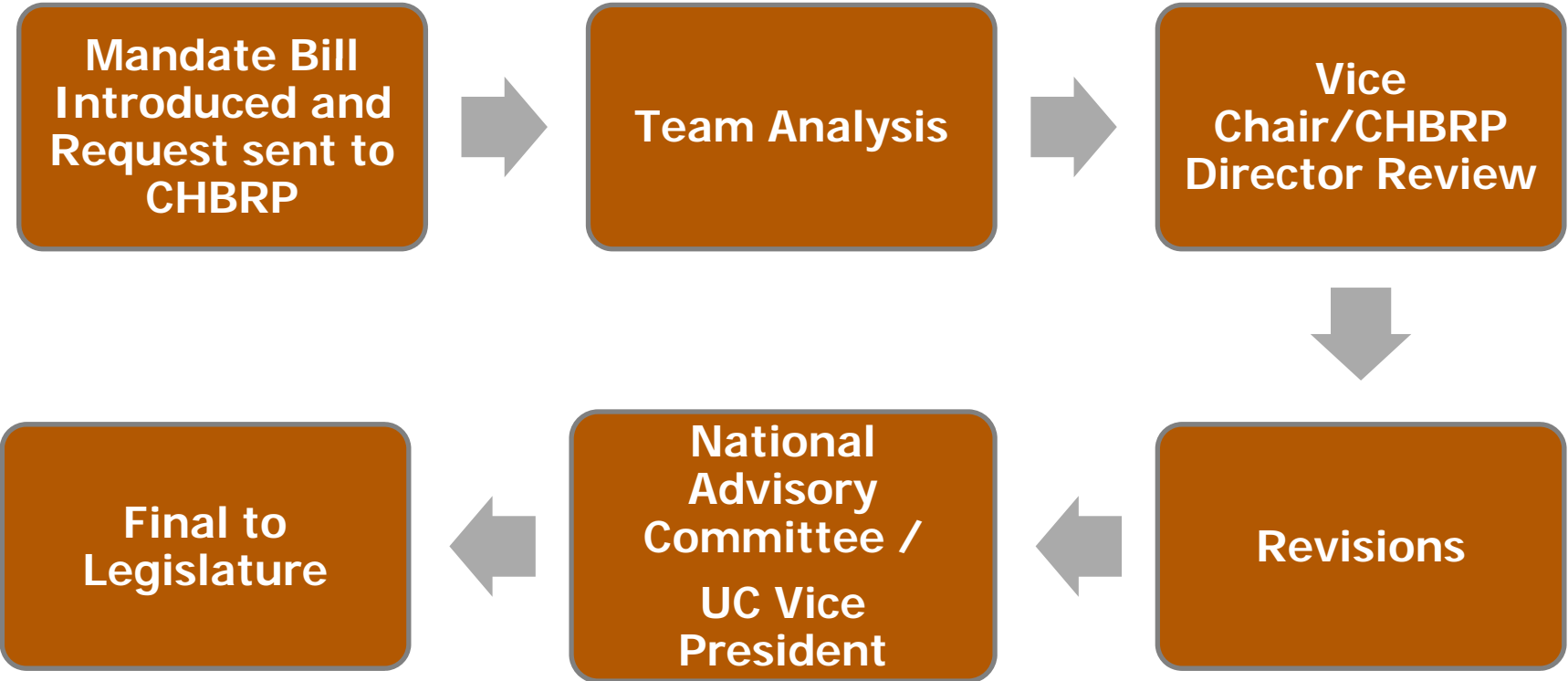


CHBRP Reports Enhance Understanding

- Leverages broad areas of expertise of University of California faculty and researchers to perform evidence-based analysis
- Neutral – without specific policy recommendations



CHBRP's 60-day Timeline



How CHBRP Works

- Upon receipt of Legislative request: Convene multi-disciplinary analytic teams:
- Each Team Evaluates:
 - Medical Effectiveness → Does a treatment work?
 - Cost → Will enrollees use it? How much will it cost?
 - Public Health → What impact will this have on the community's overall health?



CHBRP Report

- Executive Summary
 - Bill summary
 - Medical effectiveness results (outcomes)
 - Coverage, utilization, and cost estimates (Table 1)
 - Public health impacts (health of population subject to the mandate bill, disparities, productivity)

- Main Report: organized into three analytic sections

- Appendices
 - Details of literature search methods and findings
 - Limitations and assumptions of cost model
 - Information submitted by outside parties



What have we done?

- 85 Reports or Issue Analyses, 14 Letters
- Two major implementation reports
- Journal articles
- Briefings and workshops with legislative staff, public, associations
- Created a national model and example



CHBRP Reports

- Acupuncture
- Alzheimer's disease drugs
- Asthma management
- Autism treatments
- Breast cancer screening
- Chiropractic care
- Hearing aids for children
- High deductible health plans
- HPV screening and vaccine
- Inborn errors of metabolism treatment
- Lactation consultation
- Lymphedema treatments
- Mastectomies and lymph node dissection
- Maternity services
- Mental health services
- Orthotic and prosthetic devices
- Osteoporosis screening
- Ovarian cancer screening
- Propofol for colonoscopies
- Rheumatic disease drugs
- Substance disorder services
- Tobacco cessation services
- Transplant services for persons with HIV
- Vision services
- Waiver of mandates





- Completed Analyses
- Recent Legislative Requests
- Other Publications
- Recent Presentations
- How to Submit Information
- About CHBRP
 - FAQs
 - Task Force
 - National Advisory Council
 - Staff
- CHBRP Analysis Methodology
 - Overview
 - Medical Effectiveness Analysis
 - Cost Impact Analysis
 - Public Health Impact Analysis
 - Glossary of Key Terms
 - Current Mandates
 - 60-Day Timeline
- Search
- Contact Us

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What's New

Two Upcoming 2013 Events – both in the State Capitol in Sacramento

- **Thursday, January 24 – CHBRP Briefing – Health Insurance Benefit Mandate/Repeal Bills – [RSVP HERE](#)**
- **Friday, January 25 - California Health Policy Forum Briefing – Using CalSIM: Modeling Change in California’s Health Care Market in 2014 and Beyond - [RSVP HERE](#).**

CHBRP has updated a **Resource** that considers interactions between the federal preventive services mandate and the sources it references: USPSTF, HRSA, and ACIP recommendations.

CHBRP has posted a new **Policy Brief (pdf)**: Pediatric Dental and Pediatric Vision Essential Health Benefits.

About CHBRP

Established in 2002 to implement the provisions of its **authorizing statute (pdf)**, the California Health Benefits Review Program (CHBRP) responds to requests from the **State Legislature** to provide independent analysis of the medical, financial, and public health impacts of proposed health insurance benefit mandates and repeals. A small analytic **staff** in the University of California’s Office of the President works with a task force of faculty from several campuses of the University of California, Loma Linda University, University of Southern California, and Stanford University as well as actuarial consultants to complete each analysis during a 60-day period, usually before the Legislature begins formal consideration of a mandate bill. A strict conflict of interest policy ensures that the analyses are undertaken without financial or other interests that could bias the results. A **National Advisory Council**, made up of experts from outside the state of California and designed to provide balanced representation among groups with an interest in health insurance benefit mandates, reviews draft studies to assure their quality before they are transmitted to the Legislature. Each report summarizes sound scientific evidence relevant to the proposed mandate but does not make recommendations, deferring policy decision-making to the Legislature. The State funds this work through a small annual assessment of health plans and insurers in California.

This Web site provides full access to all **CHBRP analyses and the legislation** they examine. It also announces **new requests** from the Legislature and provides instructions about how interested parties can submit evidence they believe CHBRP should consider in its analyses, and other resources that describe how CHBRP does its work.

For more on CHBRP (pdf)

www.chbrp.org



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Whats New...

ANNUAL REPORT 2012

CHBRP has posted its presentations from its recent panel at the International Society on Priorities in Health Care (ISPHC)

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