

To: All Members and Legislative Staff of the Assembly

From: Mia Bonta, Chair, Assembly Committee on Health

Re: Deadlines: Bills Mandating or Repealing Health Insurance Coverage of Benefits or Services

Date: January 14, 2025

Please be advised that the Assembly Health Committee requires bills mandating health plans or health insurers to provide or offer coverage for specific health services or benefits, or proposing to repeal existing mandated benefits or services, to undergo a special review by the California Health Benefits Review Program (CHBRP). AB 1996 (Thomson), Chapter 795, Statutes of 2002, requests the University of California to prepare a written analysis with relevant data on the medical, economic, and public health impacts of such proposed legislation. CHBRP was created in response to AB 1996. SB 125 (Ed Hernandez), Chapter 9, Statutes of 2015, added an impact assessment on essential health benefits (EHBs)<sup>1</sup>, and legislation that impacts health insurance benefit designs, costs sharing, premiums, and other health insurance topics is subject to CHBRP review. To learn more about the CHBRP process or review previous CHBRP analyses and reports, please visit <u>www.CHBRP.org</u>.

## Important information to know about mandate<sup>2</sup> bills:

- 1) Health care mandate bills and bills repealing mandated benefits or services are subject to review by CHBRP before they are heard in policy committee;
- 2) Legislation that impacts health insurance benefit designs, cost sharing, premiums, and EHBs are subject to CHBRP review;
- 3) Assembly Health Committee rules provide that the Committee may not hear a mandate bill until the CHBRP review has been received and reviewed by Committee staff;
- 4) The Chair of the Assembly Health Committee requests a CHBRP report on any mandate or similar health insurance bill introduced by an Assemblymember or Senator, if not already requested by the Senate Health Committee Chair. An updated report may be necessary in some cases;

<sup>&</sup>lt;sup>1</sup> As defined in Health and Safety Code Section 1367.005 and Insurance Code Section 10112.27.

 $<sup>^{2}</sup>$  Health and Safety Code Section 127660(d) defines legislation proposing to mandate a benefit or service as requiring a health plan or insurer to do any of the following: 1) Permit a person insured or covered under the policy or contract to obtain health care treatment or services from a particular type of health care provider; 2) Offer or provide coverage for the screening, diagnosis, or treatment of a particular disease or condition; or, 3) Offer or provide coverage of a particular type of health care treatment or service, or of medical equipment, medical supplies, or drugs used in connection with a health care treatment or service.

- 5) A final draft of the bill is needed to begin the CHBRP review **and any substantive amendments to the bill may delay the CHBRP review**;
- 6) CHBRP has up to 60 days from the bill's introduction to prepare the analysis of a mandate bill; and,
- 7) Mandate bills are fiscal bills.

## **Deadlines affecting mandate bills in 2025:**

- 1) The last Committee hearing for fiscal bills will be April 29, 2025;
- 2) In order for a mandate bill to be heard before the policy committee deadline, the CHBRP review and report should be requested by the Assembly Committee on Health by **February 14, 2025**.

## Any Assemblymember considering a new state mandate is urged to first consult with Assembly Health Committee staff and be mindful of the CHBRP review process.

Please contact Keisha Anderson at (916) 319-2097 or <u>Keisha.anderson@asm.ca.gov</u>, or Riana King at (916) 319-2097 or <u>Riana.King@asm.ca.gov</u> if you have questions about the CHBRP process or the deadlines.