



CHBRP Approach to Medical Effectiveness Review

California Health Benefits Review
Program

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HEALTH BENEFITS REVIEW PROGRAM



Medical Effectiveness (ME) Analysis

- Answers the question: “does scientific evidence show whether the treatment works?”
- CHBRP provides systematic and objective reviews of evidence.
 - High-quality, peer-reviewed medical literature is preferred.
 - Other sources are used when necessary.



ME Hierarchy of Evidence

- Peer-reviewed publications
 - Meta-analyses and systematic reviews
 - Randomized controlled trials
 - Observational studies

- Other published/documentated information
 - Systematic reviews
 - Clinical guidelines

- Expert opinion - if no studies are available



ME Categories of Evidence

*clear &
convincing*

It works .

OR

**It doesn't
work.**

*pre-
ponderance*

**It seems
to work.**

OR

**It seems
not to work.**

*ambiguous /
conflicting*

**The evidence
cuts both
ways.**

insufficient

**There is not
enough
evidence to
determine
whether it
does or does
not work.**



ME Examples: Tobacco Cessation

- There is *clear and convincing* evidence that counseling (multiple types) increases long-term abstinence from smoking.
 - Evidence is *ambiguous* regarding the impact of benefit coverage on use of counseling.
- There is *clear and convincing* evidence that pharmacotherapy increases long-term abstinence from smoking.
 - A *preponderance* of evidence indicates that benefit coverage is associated with greater use of pharmacotherapy.

