

Final Presentation Topics
Residency Elective in Health Policy
Spring 2019

Policy Issue: Vaccine Exemption Law

Question: In 2015, California State Senate Bill 277 set a national standard by eliminating the ‘personal belief exemption’ for childhood vaccines. It was passed after a large measles outbreak in the state caused momentum to reduce the state’s unvaccinated rate. Since the implementation of this law, the percent of medical exemptions has tripled and some physicians have been accused of providing these exemptions for questionable reasons. Now California State Senate Bill 276 proposes to review all medical exemptions in an effort to improve the vaccination rate. As members of the Senate Health Committee, how would you advise your fellow Senators to vote on this bill?

Background: Each state has legislation regarding vaccines requirements for students, which includes exemptions for various reasons. All states allow exemptions for medical reasons, and some states allow exemptions for religious reasons, or philosophical ones. Almost all states allow religious exemptions but only 17 currently allow philosophical objections. In 2015, California State Senate Bill 277 eliminated the ‘personal belief exemption.’ This was a unique cause because this exemption encompassed both religious and philosophical beliefs. Since SB 277 took effect, the state’s kindergarten vaccination rate increased from 92.9% to 95.1%, which is at the threshold level to maintain herd immunity. However, there are 105 schools in the state where 10% of students are unvaccinated, significantly higher than the 3% medical exemption rate that is typically expected in the community. Suspicion exists for inappropriate medical exemptions, and one physician has already been placed on probation for fraudulent medical exemptions. Senate Bill 276 would require that all exemptions come from the California Department of Public Health, rather than directly from physicians. As members of the Senate Health Committee, your group must review this bill and make recommendations to accept, amend or reject this legislation and provide justification of your reasons.

Policy Issue: Tobacco Access

Question: With the advent of flavored tobacco and e-cigarette products, the use of tobacco has become more attractive and accessible to children. Companies have gone to great lengths to advertise their products using cartoons and appealing packaging that often disguises these products as candy. There are now a few proposals in the California State Legislature which would reduce underage access to these products in various ways. These proposals use age limits and advertising restrictions to regulate the sale of flavored tobacco products. As Physicians on the State Assembly Physician’s Caucus, what public health-oriented policies would you propose to help curtail tobacco access among youth and why?

Background: Tobacco curtailment has a long history since cigarettes have been able to be mass produced. Estimates have it that at least 516 million packs of cigarettes are consumed by minors, and half of them are illegally sold directly to them. Governments at all levels have been addressing this problem and most states have age restrictions on the sale of tobacco to minors. However, enforcement efforts have been variable and tobacco use has become prevalent amongst teenagers. Now with flavored and e-cigarette products directly being marketed to children, this problem is only worsening. In 2019, California State Senate Bill 38 proposes to ban the sale of these products in the state, and State Bill 39 would require sellers to deliver

tobacco products only in conspicuously marked packages. California State Assembly Bill 131 would prohibit e-cigarette manufacturers from advertising in ways that are attractive to minors. Your group should review these (and any other relevant bills) and create policy recommendations to effectively address this issue.

Policy Issue: Drug Pricing

Question: High-cost treatments for conditions such as cancer and Hepatitis C have proliferated in recent years. They have been difficult for most health systems to pay for, but this has been particularly challenging in the safety net systems such as Medicaid programs. Recently, there has been a recommendation for drug companies to license their Hepatitis C drugs directly to the federal government in order to cut down on cost for these programs. As science policy advisors to Congress, how would you advise they act on these recommendations?

Background: Hepatitis C can now be cured, but the virus still kills more than 20,000 Americans each year according to the CDC, which is more than the next 60 infectious causes of death combined. Treatment is prohibitively expensive, in the \$80,000-\$100,000 range per patient. Access to treatment is particularly difficult for patients on Medicaid programs. In April 2017, the National Academies of Science, Engineering and Medicine recommended that the drug companies producing the curative medications compete to license their patent to the federal government for patients in Medicaid programs and prisons, where the need is the highest.

Policy Issue: Opioid Addiction

Question: Opioid addiction is the biggest drug epidemic in US History and in 2017 the Department of Health and Human Services designated it as a public health emergency. Recognizing opioid-related overdose deaths as an urgent health policy concern, the LA County Board of Supervisors has tasked your group to come up with recommendations to combat the opioid crisis.

Background: In the late 1990s, there was pressure to treat pain more aggressively, with some advocating to incorporate pain assessment as a 5th vital sign. At the same time pharmaceutical companies reassured the medical community that patients would not become addicted to opioid pain relievers. As a result, health care providers began writing more prescriptions for opioid medications. This increase in prescriptions led to widespread misuse before it became clear that these medications do indeed have highly addictive potential. As opioid use has skyrocketed so have opioid-related overdose deaths. According to the CDC, in 2017 there were an estimated 47,600 deaths in the US due to opioid overdose, or about 130 deaths per day. While statistics in LA County are better than the national average, the LA County Board of Supervisors would like to develop a comprehensive approach to battle the epidemic.