The USC-Brookings Schaeffer Initiative for Health Policy is committed to developing innovative policy solutions to our nation’s most pressing health care challenges. Health care ranks as one of the top issues on today’s policy agenda as leaders grapple with approaches to provide quality health care across all population segments while reining in escalating costs to the nation and to the individual.

Since its launch in 2016, the USC-Brookings Schaeffer Initiative for Health Policy has established itself as a leader in rigorous and insightful health policy research and analysis, informing policymakers and private sector leaders. Overarching themes pursued by the Initiative include assessing the Affordable Care Act and future health reform, maximizing the value of innovation in drugs and devices, and charting the course for Medicare and payment policy.

Paul Ginsburg, Director of Public Policy at the USC Schaeffer Center and the Leonard D. Schaeffer Chair at Economic Studies at Brookings, leads the Initiative, working closely with Loren Adler, Initiative Associate Director, and Dana Goldman, Director of the USC Schaeffer Center.

This report is dedicated to Dr. Alice Rivlin, an esteemed colleague who was a steadfast adviser to the Initiative and an inspiring contributor to Initiative work focused on Affordable Care Act issues.
Using an integrated, collaborative approach that draws on the expertise of both the USC Schaeffer Center for Health Policy & Economics and the Economic Studies program at the Brookings Institution, the Initiative promotes health care reforms and policy solutions aiming to strengthen the U.S. health care system. The Initiative includes four full-time senior scholars based at Brookings in Washington, D.C., and a team of colleagues at the University of Southern California in Los Angeles who contribute to the portfolio of work.

This bicoastal partnership draws on the creativity, resourcefulness, and intellectual rigor of both institutions as they explore health policy solutions. The partnership combines the policy and analytical expertise of Economic Studies at Brookings with the data and analytic expertise of the USC Schaeffer Center to produce evidence-based policy recommendations on salient health policy issues.

In 2019, the Initiative focused on four major areas:

- **Surprise Medical Bills**
- **Prescription Drug Pricing**
- **The Future of the Affordable Care Act**
- **Cost Containment and Delivery System Reform**

Congressional staff and administration officials consistently rely on Initiative experts as a trusted resource to discuss policy issues, provide objective analyses, and offer technical assistance. The Initiative conducts both deep examinations of pressing health policy issues and shorter rapid analyses of time-sensitive proposals and developments to inform key health policy debates. The Initiative also convenes public conferences and private briefings, which include direct engagement with policymakers and other stakeholders from both the public and private sectors.
Prescription drugs and surprise billing dominated legislative debates in 2019, with Schaeffer Initiative experts playing a vital role in providing evidence and analyses to inform developing policy. Schaeffer Initiative experts frequently interacted with policymakers in the administration, Congress, and states, providing public testimony and commentary, recommendations, and technical assistance.

As in previous years, the Initiative continued to serve as a key source for understanding surprise out-of-network medical billing and developing solutions to this market failure both federally and at the state level (where five new states passed legislation). Initiative experts also analyzed the myriad drug pricing reforms and developed recommendations. And with an eye to the future, Schaeffer Initiative scholars detailed numerous proposals to expand coverage, bolster provider and insurer competition, and continue progress on delivery system reform.

**Congressional, Administration, and Governmental Agency Interaction**

Congress and the White House frequently rely on Schaeffer Initiative scholars as experts across several policy areas. Select interactions in 2019 include:

- **Congressional testimony**
  - Christen Linke Young testified to the House Energy and Commerce Subcommittee on Health on the Texas v. U.S. lawsuit and its impacts on Americans with pre-existing conditions.
  - Matthew Fiedler testified to the Senate Finance Committee on examining Medicare Physician Payment Reform, following Medicare Access and CHIP Reauthorization Act (MACRA) implementation.
  - Loren Adler led Congressional staff briefings on prescription drug reform policies, including a meeting with a small, bipartisan group of Members in the House of Representatives.
  - Christen Linke Young briefed a group of Senators at a Senate Democratic Caucus lunch on policy issues related to the ACA enrollment period.
  - Christen Linke Young worked closely with staff from three Senate offices on various forms of “junk insurance.”
  - Working with the Kaiser Family Foundation and Georgetown’s Center on Health Insurance Reforms, Christen Linke Young participated in a joint call with staff from CMS Center for Consumer Information and Insurance Oversight on tax implications of guidance on individual market wellness programs.
  - Christen Linke Young co-led an amicus brief on Association Health Plans filed in the DC Circuit Court.
  - Matthew Fiedler provided technical assistance to multiple Senate offices interested in proposals to expand the ACA’s Marketplace subsidies.
  - William Padula provided written testimony on pressure ulcer prevention to the House Committee on Appropriations Subcommittee on Labor, Health, and Human Services, Education, and Related Agencies.
  - Loren Adler had multiple discussions with White House staff around surprise billing and price transparency efforts.
  - Paul Ginsburg met with the Center for Medicare and Medicaid Innovation and the Pacific Business Group on Health to discuss innovations by large employers that can be tested in Medicare.
  - Bryan Tysinger presented a review of the Social Security MINT microsimulation model to the Social Security Advisory Board.

**State and Local Lawmaker Interaction**

- Loren Adler provided technical assistance to state policymakers from several different states on surprise billing legislation, and participated in events on the issue in Tennessee and Virginia. He briefed state patient organizations on surprise billing.

- Christen Linke Young provided public testimony to the Maine state legislature about the individual market and strategies to increase health insurance coverage.

**Impact on Health Policy**

- Loren Adler led Congressional staff briefings on prescription drug reform policies, including a meeting with a small, bipartisan group of Members in the House of Representatives.
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- Bryan Tysinger presented a review of the Social Security MINT microsimulation model to the Social Security Advisory Board.
• Christen Linke Young spoke at an America’s Health Insurance Plans (AHIP) conference on 1332 waivers to an audience largely comprised of individuals from state government.

• Loren Adler, Matthew Fiedler, and Christen Linke Young met with a team from the Montana Insurance Commissioner’s office to discuss provider pricing in their state’s employee health plan.

• Neeraj Sood presented on pharmaceutical benefit managers to the California PBM Task Force, the Wisconsin Governor’s Task Force on Reducing Prescription Drug Prices and the National Association of Insurance Commissioners.

**Essential Scan**

The *Essential Scan*, a biweekly e-publication produced by the Initiative, surfaces the policy implications from new studies on a range of health services and health care payment research. Subscribers are primarily policymakers, Hill staff, journalists, and researchers. Launched in 2016, the *Essential Scan* has an open rate of 34% and a click-through rate of 14%.

“It was never about a slightly better price or deal…[Hepatitis C] is a leading infectious disease killer of our time, and through in a large part the innovation of Americans—our research institutions—we have a cure. And it’s unacceptable that in this day and age we cannot provide it and we have people suffering, bleeding internally and dying unnecessarily because of the price. So we set out to solve it.”

— REBEKAH GEE, Former Secretary, Louisiana Department of Health

The Schaeffer Initiative work and expertise is recognized as a primary, vital source for information on policy solutions for surprise out-of-network billing. Through a grant from Arnold Ventures, USC-Brookings Schaeffer Initiative experts continued to produce myriad blog posts analyzing and critiquing new policy proposals, as well as research examining different policy options.

The Initiative held a conference, Emerging Policy Solutions to Surprise Medical Bills, following the release of the white paper, “State Approaches to Mitigating Surprise Out-of-network Billing.” The conference included a panel of state and federal policymakers, as well as a panel of stakeholders from America’s Health Insurance Plans, the American Hospital Association, the American College of Emergency Physicians, and Families USA. Loren Adler provided an overview of the paper, which details a number of policy responses and their potential impacts and concludes with a series of recommendations.

Initiative fellows were frequently sought after as experts on this topic. Loren Adler, Christen Linke Young, Matthew Fiedler, Paul Ginsburg, and Erin Trish regularly provided briefings and technical assistance both to Congress, the Administration, and to individual states. Similarly, they were mainstays in the media to help explain the policy issues at play. Christen Linke Young provided public testimony on surprise billing to the House Education & Labor Subcommittee on Health, Employment, Labor, and Pensions on April 2, 2019. Senator Lamar Alexander, chairman of the Senate HELP Committee, directly referenced Loren Adler in an op-ed in the National Review on this issue. A Committee on Energy & Commerce background memo on this issue referenced Schaeffer Initiative work.

The high demand for research and policy analyses around this issue led the Initiative to produce an online archive of explainer and analysis pieces by Initiative fellows easily accessible to policymakers, media, and private sector leaders. This micro-site, “Everything You Need to Know about Surprise Billing,” provides explainer pieces, policy proposal evaluations, and additional resources for understanding and responding to the issue.

In addition to producing blog posts evaluating bills introduced in Congress to address this issue, the Initiative also stayed on top of newly released data, conducting new analyses of both California and New York’s state laws regarding surprise billing. The California analysis was featured prominently in a New York Times article on the law.
This year, the Schaeffer Initiative received support from the Commonwealth Fund to write a series of three blogs analyzing the Trump administration’s proposed reforms to drug payment under Medicare Part B, which covers physician-administered drugs. Led by Paul Ginsburg and Steven Lieberman, the three blogs ran in Health Affairs on the following topics:

- The first blog post, CMS’ International Pricing Model for Medicare Part B Drugs: Implementation Issues, discussed how CMS might tie reimbursement for drugs administered in outpatient settings to an international price index.
- The second piece, The Use of Vendors in Medicare Part B Drug Payment, looked at the Administration’s proposal to create a vendor program as a way to encourage competition in the purchase of Part B drugs. The current system for purchasing these drugs—a buy-and-bill approach—incentivizes the use of more expensive drugs. The blog post went beyond the Administration proposal with an approach that provides an alternative, more productive role for vendors.
- The third piece, Considerations for Expanding International Reference Pricing beyond Medicare Part B, featured contributions from Loren Adler and Christine Linke Young and examined how the administration’s proposed model could be expanded, as U.S. prices are higher than international prices across payers.

Initiative scholars also continued to look at Medicare Part D reform. In a New England Journal of Medicine Perspective, Erin Trish, Paul Ginsburg, Geoffrey Joyce, and Dana Goldman looked at policy options for Part D plans to take on more risk in the market, along with increasing beneficiary protections. As Part D has been in existence for over a decade now, the piece argues a combination of new very expensive drugs and policies to eliminate the “donut hole” have led to a situation in which combination of new very expensive drugs and policies to increase beneficiary protections. As Part D has been in existence for over a decade now, the piece argues a combination of new very expensive drugs and policies to eliminate the “donut hole” have led to a situation in which
drugs spending have been greatly undermined. Erin Trish and Dana Goldman also wrote an opinion piece for STAT on the issue proposing the elimination of drug rebates coupled with a way to insulate seniors from the cost of increased Part D premiums.

The blog posts on Part B drugs led to additional funding from the Commonwealth Fund to support a series of blogs on Medicare Part D (pharmacy) payment issues to be published in 2020. The first of these, authored by Paul Ginsburg and Steven Lieberman, will focus on the House-passed legislation to negotiate drug pricing on the basis of international prices.

In July, the Initiative co-hosted an event with the Hutchins Center on Fiscal & Monetary Policy, “Louisiana’s Prescription Drug Experiment: A Model for the Nation?”, with Schaeffer Initiative experts Neeraj Sood and Matthew Fielder participating as panelists. The event looked at the innovative Louisiana drug subscription model to provide hepatitis C drugs to Medicaid beneficiaries and prison inmates across the state, and the Louisiana Secretary of the Department of Health was there to discuss the experience in the state firsthand.

With drug pricing front and center on the policy stage throughout the year, Schaeffer Initiative fellows were often called on to provide expertise and brief staffer on the Hill. For example, Loren Adler briefed a large group of Congressional health care staff on drug pricing issues and co-led in a bipartisan drug pricing briefing for a small group of representatives. Paul Ginsburg, Steven Lieberman, Erin Trish, and Bill Padula also provided direct technical assistance to the Senate Committee on Finance and the House Ways and Means Committee. Reacting to the CBO estimate that Speaker Nancy Pelosi’s drug pricing reform bill would save $345 billion over seven years, Dana Goldman wrote an op-ed in STAT that questioned whether the analysis took into consideration the bill’s long-term consequences on drug discovery and population health.

Neeraj Sood and Martha Ryan penned a white paper on state laws and proposals aiming to increase transparency around prescription drug pricing. The study found most of these efforts fall short of achieving their goal and could misfire, primarily attributing this to the opaqueness of the pharmaceutical distribution system. Sood also penned an op-ed on the same topic in The Hill where he advocates for price and profit transparency throughout the drug supply chain.

In response to the high price of cancer therapies, Darius Lakdawalla and Dana Goldman penned an op-ed in The Wall Street Journal proposing that life insurance companies help pay for the treatments that prolong the lives of their policyholders. In a STAT op-ed on cancer drugs, Goldman and Alice Chen suggested an alternate approach to how we value cancer treatment using mean survival gain as a metric.
The Future of the Affordable Care Act

Working alongside Brookings senior fellow Henry Aaron, Matthew Fiedler, Loren Adler, Paul Ginsburg, and Christen Linke Young released a New England Journal of Medicine Perspective, “Building on the ACA to Achieve Universal Coverage.” The Initiative continued this theme of exploring ways to pursue universal coverage with an event hosted at USC, highlighted by keynote speaker California Attorney General Xavier Becerra. The event included an address from Becerra followed by fireside chat with Paul Ginsburg. Conference presentations featured Christen Linke Young, Matthew Fiedler, and Loren Adler discussing paths to achieve universal insurance coverage and other central health care reform issues.

Geoffrey Joyce wrote an op-ed positing that Medicare Advantage for All may be a better policy approach than Medicare for All in a piece featured in MarketWatch. Adding to this discussion was a comparison of Medicare and Medicare Advantage in a piece by Neeraj Sood in the Annals of Internal Medicine. Writing in The Conversation, Dana Goldman provided insights on employer-sponsored insurance and why it may not be as good for you as you think.

Christen Linke Young utilized her legal expertise to provide analysis on the Texas v. U.S. lawsuit, which seeks to render the entire ACA as unconstitutional. In February, Young served as an expert witness before the House Energy & Commerce Subcommittee on Health during a public hearing on the lawsuit and its impacts on Americans with pre-existing conditions. She also released a series of blogs detailing where each state stands in the lawsuit, explaining the Trump Administration’s Department of Justice stance, and clarifying the December verdict from the Fifth Circuit Court and its likely effects on the health insurance market. Young also appeared on the Brookings 5 on 45 podcast to discuss the legal challenges the ACA has faced.

In addition, Young produced a new report, “Three Ways to Make Health Insurance Auto-enrollment Work,” recommending a retroactive coverage backstop, assessment at tax filing, and targeting specific populations at times of coverage transitions. Young’s report builds on the ACA to reduce the number of uninsured individuals in the U.S.

In response to a proposed rule from the Trump administration that would essentially reduce the value of the premium tax credit and raise the maximum allowed cap on out-of-pocket spending for people with private insurance, nonresident fellow Jason Levitis penned a blog post explaining why the change was not only bad policy, but also vulnerable to legal challenges. The post was published on the USC-Brookings Schaeffer on Health Policy blog.

In another Initiative blog post, Levitis, along with fellows Christen Linke Young and Matthew Fiedler, commented on the administration’s finalized rule to allow employers to pay for their worker’s insurance by subsidizing premiums in the individual market, calling this rule a “step in the wrong direction.”

“Health care should not be a privilege. And we should not let anyone—and this attorney general will not let anyone treat health care as a commodity. If we can get there, I guarantee that we’ll be at universal coverage really fast.”

— XAVIER BECERRA, California Attorney General

Xavier Becerra, California Attorney General, discusses the importance of universal health coverage at the Schaeffer Initiative conference held at the University of Southern California on September 26, 2019.
Cost Containment and Delivery Reform

Following a request from the Senate Committee on Health, Education, Labor and Pensions (HELP), USC-Brookings Schaeffer Initiative fellows partnered with scholars from the American Enterprise Institute (AEI) to provide a series of policy recommendations to reduce health care costs. The recommendations, which were limited to those agreed to by most of the scholars at each organization, included:

- Limiting the tax exclusion of employer-sponsored insurance
- Ensuring effective anti-trust enforcement
- Repealing any willing provider laws
- Enacting surprise billing reform
- Expanding bundled payments, among other things.

The letter to the Committee received extensive media attention. Several recommendations provided to the Senate HELP Committee were directly featured in the Lower Health Care Costs Act, introduced by Senator Lamar Alexander, Committee Chairman, and Senator Patty Murray, Ranking Member.

Paul Ginsburg worked closely with nonresident fellow Kavita Patel and consultant Bruce Steinwald to explore ways to increase the number of primary care physicians in a blog post, “We Need More Primary Care Physicians: Here’s Why and How.” The post extended a white paper on financing graduate medical education that was published at the end of 2018.

Matthew Fiedler testified before the Senate Finance Committee, examining MACRA implementation and suggesting paths forward to better incentivize delivery system reform without placing unnecessary administrative burdens on providers.


Matthew Fiedler released a report with coauthors Jason Furman and Wilson Powell III, Increasing federal support for state Medicaid and CHIP programs in response to economic downturns.

Erin Trish and colleagues published a study in Health Services Research on the impacts of health insurance and hospital market concentration on patient care.

Writing in The Conversation, Neeraj Sood commented on the hospital price transparency regulations put forth by the Trump administration.
2019 Conferences

JANUARY 30, 2019
Reforming Stark/Anti-Kickback Policies

Eric Hargan, the Deputy Secretary of Health and Human Services, discussed HHS’ goal of taking a holistic view on shifting the health care system’s focus from volume to value-based care, including an update of current regulations—like the Stark law—which were built with the traditional fee-for-service system in mind.

Reactor panel: Tim Gronniger (President, Caravan Health), Bobbie Gostout (Vice President, Mayo Clinic), Kimberley Brandt (Principal Deputy Administrator for Operations, CMS), Kevin McAnaney (Law Office of Kevin McAnaney), moderated by Christen Linke Young.

MARCH 19, 2019
A Conversation with Departing FDA Commissioner Scott Gottlieb on His Tenure and Policy Reform

In partnership with the Brookings Hutchins Center on Fiscal and Monetary Policy, the USC-Brookings Schaeffer Initiative hosted outgoing FDA Commissioner Scott Gottlieb to reflect on his tenure and policy reforms. Gottlieb discussed tobacco and nicotine policies, e-cigarettes, impacts of government shutdowns on FDA inspections, and CBD in the food supply with Bloomberg reporter Anna Edney.

MARCH 22, 2019
Emerging Policy Solutions to Surprise Medical Bills

In conjunction with a release of a new analysis detailing policy approaches to limit surprise out-of-network billing, the Initiative hosted a conference featuring a range of stakeholders for a discussion around surprise medical bills. Loren Adler presented the newly released analysis, followed by panel discussions. The event was broadcast on C-SPAN.

Policymaker panel: Jessica Altman (Commissioner, Pennsylvania Insurance Department), Jane Beyer (Senior Health Policy Advisor, Washington State Office of the Insurance Commissioner), Lauren Block (Program Director, Health Division, National Governors Association), Mary Moody (Health Policy Advisor, Office of Senator Bill Cassidy), moderated by Mark Hall.

Stakeholder panel: L. Anthony Cirillo (member, American College of Emergency Physicians), Claire McAndrew (Director of Campaigns and Partnerships, Families USA), Molly Smith (Vice President, Coverage and State Issues Forum, American Hospital Association), Jeanette Thornton (Senior Vice President, Product, Employer, and Commercial Policy, America’s Health Insurance Plans), moderated by Paul Ginsburg.

APRIL 22, 2019
World Class: A Conversation with Author Dr. William A. Haseltine

NYU Langone Health is known today for delivering clinical excellence and patient satisfaction, and for their outstanding safety performance. In less than a decade, the once unprofitable, poorly ranked medical institution had turned into a global leader in patient-centered care—and generated a substantial financial surplus. How did they do it?

A presentation by Dr. Haseltine outlined the levers of change that the institution applied to deliver effective health care at manageable costs. This was followed by a fireside chat with Paul Ginsburg.

“Done right, regulatory reform like this is an opportunity to examine the barriers that regulations create between market actors and determine how we can reshape those barriers or reduce them so that new arrangements, relationships and solutions can emerge.”

— ERIC HARGAN, Deputy Secretary, Health and Human Services
Hospital productivity trends and their implications for Medicare policy on hospital payment rates were the focus of an Initiative conference featuring an overview by John Romley, a fellow at the USC Schaeffer Center. The presentation was followed by two panels including:

Reactor panel: Chapin White (Senior Policy Researcher at RAND) and Louise Sheiner (Policy Director, The Hutchins Center on Fiscal and Monetary Policy at the Brookings Institution), moderated by Paul Ginsburg.

Policy panel: Paul Spitalnic (Chief Actuary at the Centers for Medicare and Medicaid Services), James Mathews (Executive Director of MedPAC), Stuart Altman (Chairman of the Massachusetts Health Policy Commission), moderated by Chapin White.

"The pure subscription model can eliminate hepatitis C at the lowest cost."
— Neeraj Sood, USC Schaeffer Center and USC Price School of Public Policy

The high cost of prescription drugs has become an increasingly pressing concern for policymakers, insurers, and families. New drugs—like those now available for hepatitis C—offer tremendous medical benefits, but at a cost that puts them out of reach for many patients. In an effort to address the affordability dilemma, the Louisiana Department of Health has introduced a novel “subscription” model under which Asegua Therapeutics, a subsidiary of Gilead Sciences, will supply, for a negotiated sum, enough hepatitis C drugs to cure virtually all incarcerated and Medicaid patients suffering from hepatitis C in Louisiana over the next five years.

The Schaeffer Initiative and the Brookings Institution’s Hutchins Center on Fiscal & Monetary Policy co-hosted a discussion of the Louisiana experiment as well as other novel approaches to increasing prescription drug affordability. Featured speakers included Louisiana Secretary of Health Rebekah Gee and Wendell Primus, senior advisor to Speaker of the House Nancy Pelosi. Neeraj Sood provided an overview of the benefits of subscription models followed by a panel discussion.
Media Impact

Experts from the Schaeffer Initiative are regularly in touch with media for comment on the trending health care issues of the day. With expertise on Medicare, Medicaid, the Affordable Care Act, and pharmaceutical pricing, among other issues, media outlets rely on Initiative expertise for timely research, analysis, and background discussion on salient topics under consideration in Washington and across the nation. Additionally, media frequently attend Schaeffer Initiative conferences.

Media highlights include:

“In California, a ‘Surprise’ Billing Law is Protecting Patients and Angering Doctors” – The New York Times (Sarah Kliff and Margot Sanger-Katz)

“Bipartisan Support Builds for Limits on Surprise Medical Bills” – NPR (Shefali Luthra and Emmarie Huetteman)

“Justices to Hear ObamaCare Case with Billions at Stake” – The Hill (John Kruzel)

“The Best-case and Worst-case Scenarios for Trump’s Health Care Transparency Rule” – Vox (Dylan Scott)

“The Most Popular Obamacare Plan will See Premiums Drop 4% Next Year, Coupled with a Boost in Insurers” – Business Insider (Joseph Zeballos Roig)

“The Bare Minimum America could do to Expand Health Coverage” – Vox (Dylan Scott)

“Court Win may not Solve Hospitals’ Site-neutral Pay Problem” – Modern Healthcare (Susannah Luthi)

“Surprise! Congress might actually End Big, Unexpected Medical Bills” – The Washington Post (Editorial Board)

“Are Prescription Drug Prices Going Down?” – The Washington Post (Salvador Rizzo)

“Trump Hopes to Stem Tide of Legal Setbacks on Health Care” – The Wall Street Journal (Stephanie Armour)

“1500+ Media Mentions

“We still believe that e-cigarettes could be a useful tool for currently addicted adult smokers, but it can’t come at the expense of all this youth use.”

— SCOTT GOTTLIEB, Former FDA Commissioner

Scott Gottlieb discusses his tenure at the FDA with reporter Laurie McGinley, The Washington Post, at a Schaeffer Initiative event on March 19, 2019.
Experts

The Schaeffer Initiative for Health Policy successfully melds the data and analytic strengths of the USC Schaeffer Center with the policy and analytic expertise of Economics Studies at Brookings to provide insights on the nation’s most pressing health policy challenges. To ensure effective collaboration across the two organizations, Initiative experts conduct regularly scheduled calls and an annual strategic retreat at the Schaeffer Center in Los Angeles. These ongoing interactions allow the experts to set an annual plan and to seed new collaborative projects.

Leadership

**Paul Ginsburg**, PhD, Director of the USC-Brookings Schaeffer Initiative for Health Policy; Leonard D. Schaeffer Chair in Health Policy Studies, Brookings Institution; Director of Public Policy, USC Schaeffer Center; and Professor of Public Policy, USC Price School of Public Policy

Ginsburg is a well-known health policy expert, frequently called upon by government officials and agencies and the media. Since 2016, he has served as a Commissioner on the Medicare Payment Advisory Commission (MedPAC). From 1995 through 2013, Ginsburg founded and ran the Center for Studying Health System Change, and before that served as Executive Director of the predecessor to MedPAC, the Physician Payment Review Commission. He also served as Deputy Assistant Director at the Congressional Budget Office. Ginsburg was named to a new National Academy of Medicine committee: NAM Committee on Emerging Science, Technology and Innovation. The committee will begin its work in January 2020.

**Dana P. Goldman**, PhD, Leonard D. Schaeffer Director’s Chair, USC Schaeffer Center; Distinguished Professor of Public Policy, Pharmacy, and Economics, USC School of Pharmacy and USC Price School of Public Policy; Nonresident Senior Fellow, Brookings

Goldman is the author of over 250 articles and book chapters, and has been published in leading medical, economic, health policy, and statistics journals. His research focuses on medical innovation and regulation, pharmacoconomics, health care costs, public health, comparative effectiveness and outcomes, global health policy, and patient centered outcomes. An elected member of the National Academy of Medicine and the National Academy of Social Insurance, he is a health policy advisor to the Congressional Budget Office, Covered California (the California insurance exchange), the Fred Hutchinson Cancer Institute, and is a frequent speaker on health care issues in the media.

**Loren Adler**, MA, Associate Director, USC-Brookings Schaeffer Initiative for Health Policy

Adler’s research focuses on health insurance markets and provider pricing, and he is regularly called upon for technical assistance by federal and state lawmakers. Previously, Adler spent several years researching health care and fiscal policy at the Bipartisan Policy Center and Committee for a Responsible Federal Budget.

Fellows at Brookings

**Matthew Fiedler**, PhD, Fellow, USC-Brookings Schaeffer Initiative for Health Policy

Fiedler’s research focuses on the Affordable Care Act, Medicare, and provider payment. He previously served as Chief Economist for the Council of Economic Advisers in the Obama Administration, overseeing work on the creation and operation of the Health Insurance Marketplaces, health insurance regulation, Medicaid expansion, Medicare and private payment reform efforts, the Cadillac tax, and analyzed trends in health care costs and health insurance coverage.

**Christen Linke Young**, JD, Fellow, USC-Brookings Schaeffer Initiative for Health Policy

Young’s research focuses on the insurance reforms and Medicaid expansion under the ACA, and state and federal policies to promote health care coverage and affordability. She previously served as the Deputy Secretary for the North Carolina Department of Health and Human Services, overseeing the state’s Medicaid agency, improving coordination of social service benefits, and supporting child welfare outcomes. Before that, she was the Principal Deputy Director of the Center for Consumer Information and Insurance Oversight, implementing ACA market reforms and overseeing the operation of the federal Health Insurance Marketplace.
Fellows at the USC Schaeffer Center

**Jason Doctor**, PhD, Director of Health Informatics, Schaeffer Center; Norman Topping Chair in Medicine and Public Policy and Chair of the Department of Health Policy and Management, USC Price School of Public Policy

Doctor’s research focuses on behavioral economics and the use of choice architecture to affect policy in health and medicine. His current work explores behavioral interventions to reduce inappropriate prescribing of antibiotics and to address the opioid epidemic.

**Geoffrey Joyce**, PhD, Director of Health Policy, Schaeffer Center; Chair of Pharmaceutical and Health Economics Department and Associate Professor, USC School of Pharmacy


**Darius Lakdawalla**, PhD, Director of Research, Schaeffer Center; Quintiles Chair in Pharmaceutical Development and Regulatory Innovation, USC School of Pharmacy; Professor, USC Price School of Public Policy

Lakdawalla’s research focuses on the economics of risks to health, the value and determinants of medical innovation, the economics of health insurance markets, and the industrial organization of health care markets. He is a Research Associate at the National Bureau of Economic Research. Lakdawalla serves as Associate Editor for the *Review of Economics and Statistics, The American Journal of Health Economics*, and *The Journal of Health Economics*, and an editorial board member at the *American Journal of Managed Care: Evidence-Based Diabetes* and the *American Journal of Managed Care: Evidence-Based Oncology*.

**John Romley**, PhD, Senior Fellow, Schaeffer Center; Associate Professor of Public Policy, USC Price School of Public Policy; Associate Professor of Pharmaceutical and Health Economics, USC School of Pharmacy

Romley’s research focuses on health care costs, public health, insurance markets and benefits design, and medical innovation and regulation. He participated in the first nationwide study of disparities in alcohol retailing in urban neighborhoods, with support from the Robert Wood Johnson Foundation, and was a co-investigator in an AHRQ-funded study that identified, categorized and evaluated efficiency measures in health care. He is the Managing Editor of *Forum for Health Economics & Policy*.

**Neeraj Sood**, PhD, Strategic Advisor to the Director, Schaeffer Center; Vice Dean for Research and Faculty Affairs and Professor of Public Policy, USC Price School of Public Policy

Widely published in peer-reviewed journals and frequently quoted in national media, Sood’s work focuses on pharmaceutical markets, health insurance, economics of innovation, Medicare, and global health. He has worked with the National Academies of Sciences, Engineering and Medicine on several projects, most recently in their report on the elimination of hepatitis B and C, and has provided insights to several government entities, including the Federal Trade Commission and the Senate.

**Erin Trish**, PhD, Associate Director, Schaeffer Center; Assistant Professor, USC School of Pharmacy; Nonresident Fellow, Brookings

Trish’s research focuses on the intersection of public policy and health care markets, with recent projects on surprise medical bills, prescription drug spending, health care market concentration, and health care reform. Her research has been funded by grants from the Robert Wood Johnson Foundation and the Laura and John Arnold Foundation, and published in leading health policy, health economics, and medical journals. She has testified in the California State Assembly and presented her research at numerous federal agencies, including the Congressional Budget Office, Federal Trade Commission, Office of the Assistant Secretary for Planning and Evaluation, and the Center for Consumer Information and Insurance Oversight.
Van Nuys’s recent research focuses on the social value of novel therapies for heart failure and hepatitis C, the flow of funds in the pharmaceutical distribution chain, and the impact of commercial practices such as copay coupons and copay clawbacks on the utilization and cost of prescription drugs. Her work has been published in leading journals in economics, medicine, finance and health policy, and she is frequently called upon by the media for expert comment.

**Contributing Scholars**

**Mark Hall, JD, Nonresident Senior Fellow, Brookings; Fred D. & Elizabeth L. Turnage Professor of Law, Wake Forest University**

Hall is one of the nation’s leading scholars in the areas of health care law, public policy, and bioethics. He has been published in law reviews at Berkeley, University of Chicago, Duke, University of Michigan, University of Pennsylvania, and Stanford, and teaches at the Wake Forest Graduate Program for Bioethics and its MBA program.

**Jason Levitis, JD, Nonresident Fellow, Brookings**

From 2009–2017, Levitis served in various senior positions at the U.S. Treasury Department, leading ACA implementation and the state innovation waiver process.

**Steven Lieberman, MPhil, MA, Nonresident Fellow, Brookings**

Lieberman has had a decades-long career in Washington with senior positions at the Office of Management and Budget, the Congressional Budget Office, and the Centers for Medicare & Medicaid Services. In between government service, Lieberman worked in executive roles at large HMO plans. He is currently President of Lieberman Consulting and a Senior Advisor to the Bipartisan Policy Center.

**Kavita Patel, MD, MPH, Nonresident Fellow, Brookings; Practicing Primary Care Physician, Sibley Memorial Hospital**

Patel, a practicing primary care physician, also serves as an Advisor to the Bipartisan Policy Center and a member of the Health and Human Services Physician-Focused Payment Model Technical Advisory Committee. Previously she worked in the Obama Administration as director of policy for the Office of Intergovernmental Affairs and Public Engagement at the White House. Prior to that Patel was Deputy Director on Health for Senator Edward Kennedy.

**Bruce Steinwald, MBA**

Steinwald is a health economist with decades of experience in academia, government, and private consulting. He currently operates a small consulting practice in Washington and serves on the Physician-Focused Payment Model Technical Advisory Committee, which advises the Secretary of Health and Human Services on Medicare payment reforms.
Publications

**Schaeffer Initiative White Papers**

Three ways to make health insurance auto-enrollment work (June 13, 2019) – Christen Linke Young

Increasing federal support for state Medicaid and CHIP programs in response to economic downturns (May 16, 2019) – Matthew Fiedler, Jason Furman, Wilson Powell III

State approaches to mitigating surprise out-of-network billing (February 19, 2019) – Loren Adler, Matthew Fiedler, Paul Ginsburg, Mark Hall, Erin Trish, Christen Linke Young, Erin Duffy

**Journal Articles**

Short-Term Budget Affordability of Hepatitis C Treatments for State Medicaid Programs (December 2019) – J. W. Chou, A.R. Silverstein, Dana Goldman, *BMC Health Services Research*


Do Health Insurance and Hospital Market Concentration Influence Hospital Patients’ Experience of Care? (August 2019) – C. Hanson, B. Herring, Erin Trish, *Health Services Research*


Building on the ACA to achieve universal coverage (March 27, 2019) – Matthew Fiedler, Henry Aaron, Loren Adler, Paul Ginsburg, Christen Linke Young, *New England Journal of Medicine*

Paying Patients to Switch: Impact of a Rewards Program on Choice of Providers, Prices and Utilization (March 1, 2019) – C.M. Whaley, L. Vu, Neeraj Sood, Michael Chernew, L. Metcalfe, A. Mehrotra, *Health Affairs*


Healing the Poor: The Influence of Patient Socioeconomic Status on Physician Supply Responses (February 10, 2019) – Alice Chen, Darius Lakdawalla, *Journal of Health Economics.*

Improving the Medicare Physician Fee Schedule: Make it Part of Value-based payment (February 5, 2019) – Robert Benson, Paul Ginsburg, *Health Affairs*

**Blogs / Commentary / Podcasts**

Provider charges relative to Medicare rates, 2012-2017 (December 5, 2019) – USC-Brookings Schaeffer on Health Policy blog, Loren Adler, Sobin Lee, Kathleen Hannick, Erin Duffy

What the Trump Administration gets right about hospital price transparency (November 27, 2019) – *The Conversation*, Neeraj Sood

The success of Medicare Advantage makes it a better policy choice than Medicare for All (November 19, 2019) – *MarketWatch*, Geoffrey Joyce

The biggest health care issues of the 2020 election (November 15, 2019) – *Brookings Cafeteria Podcast*, Matthew Fiedler, Christen Linke Young

The Supreme Court will hear a health care case in December, but its decision on risk corridors won’t affect the ACA (November 4, 2019) – USC-Brookings Schaeffer on Health Policy blog, Christen Linke Young

Experience with New York’s arbitration process for surprise out-of-network bills (October 24, 2019) – USC-Brookings Schaeffer on Health Policy blog, Loren Adler

It’s hard to lower drug prices if you don’t know what they are (Oct. 19, 2019) – *The Hill*, Neeraj Sood
CBO estimate of Pelosi drug bill misses its long term impact on health (October 16, 2019) – STAT, Dana Goldman

Accounting for hope: Using “mean” survival gain to price new cancer drugs (October 14, 2019) – STAT, Alice Chen, Dana Goldman

Understanding the bipartisan Senate Finance prescription drug reform package (October 3, 2019) – USC-Brookings Schaeffer on Health Policy blog, Loren Adler, Paul Ginsburg, Steven Lieberman


The Trump DOJ has taken an unexpected and unworkable position on the ACA (September 18, 2019) – USC-Brookings Schaeffer on Health Policy blog, Christen Linke Young

MAP: Where does your state stand in Texas v. U.S.? (September 18, 2019) – USC-Brookings Schaeffer on Health Policy blog, Kathleen Hannick and Christen Linke Young

Retroactive enrollment: A feasible way to bring auto-enrollment to the individual market (September 10, 2019) – Health Affairs blog, Christen Linke Young

Considerations for expanding international reference pricing beyond Medicare Part B (September 9, 2019) – Health Affairs blog, Loren Adler, Steven M. Lieberman, Christen Linke Young, Paul Ginsburg

Why your employer sponsored insurance may ultimately not be good for you (September 9, 2019) – The Conversation, Dana Goldman

Is this the health care plan both Republicans and Democrats can agree on? (August 6, 2019) – MarketWatch, Dana Goldman

The use of vendors in Medicare Part B drug payment (August 2, 2019) – Health Affairs blog, Paul Ginsburg, Caitlin Brandt, Steven M. Lieberman

What is surprise billing? (August 1, 2019) – USC-Brookings Schaeffer on Health Policy blog, Christen Linke Young, Matthew Fiedler, Loren Adler, Sobin Lee

Rep. Ruiz’s arbitration proposal for surprise billing (H.R. 3502) would lead to much higher costs and deficits (July 16, 2019) – Health Affairs blog, Loren Adler, Erin Duffy, Paul Ginsburg, Mark Hall, Erin Trish, Christen Linke Young

CMS’s International Pricing model for Medicare Part B drugs: Implementation issues (July 9, 2019) – USC-Brookings Schaeffer on Health Policy blog, Steven M. Lieberman, Paul Ginsburg

We need more primary care physicians: Here’s why and how (July 8, 2019) – USC-Brookings Schaeffer on Health Policy blog, Bruce Steinwald, Paul Ginsburg, Caitlin Brandt, Sobin Lee, Kavita Patel

Federal surprise billing legislation does not violate the Constitution (July 1, 2019) – USC-Brookings Schaeffer on Health Policy blog, Christen Linke Young

Insurance status churn and auto-enrollment (June 19, 2019) – USC-Brookings Schaeffer on Health Policy blog, Sobin Lee and Christen Linke Young

The Trump administration’s final HRA rule: Similar to the proposed but some notable choices (June 14, 2019) – USC-Brookings Schaeffer on Health Policy blog, Christen Linke Young, Matthew Fiedler, Jason Levitis

Here’s how we can control drug costs while spurring innovation (June 14, 2019) – The Hill, Dana Goldman

Network matching: An attractive solution to surprise billing (May 23, 2019) – Health Affairs blog, Loren Adler, Matthew Fiedler, Benedic Ippolito

Breaking down the bipartisan Senate group’s new proposal to address surprise billing (May 21, 2019) – Health Affairs blog, Loren Adler, Paul Ginsburg, Mark Hall, Erin Trish

Analyzing the House E&C committee’s bipartisan surprise out-of-network billing proposal (May 14, 2019) – Health Affairs blog, Loren Adler, Paul Ginsburg, Mark Hall, Erin Trish

The relationship between network adequacy and surprise billing (May 10, 2019) – USC-Brookings Schaeffer on Health Policy blog, Christen Linke Young, Loren Adler, Paul Ginsburg, Mark Hall
To help people with mental illness, keep them in school (April 17, 2019) – CalMatters, Tom Insel, Seth Seabury

The Trump administration’s new challenge to the Affordable Care Act (March 27, 2019) – 5 and 45, Christen Linke Young

Health care’s killer app: Life insurance (March 21, 2019) – The Wall Street Journal, Dana Goldman, Darius Lakdawalla

Will robots replace doctors? (March 5, 2019) – Health Affairs blog, Bob Kocher, Zeke Emanuel

A new way to pay for innovative drugs. Provide universal access, and not break the bank (February 28, 2019) – The Conversation, Neeraj Sood

Federal policy to end surprise billing: Building on prior approaches (February 22, 2019) – Health Affairs blog, Mihir Dekhne, Loren Adler, Kyle Sheetz, Karen Chhabra

Ending drug rebates will increase Medicare Part D premiums. Most seniors will be insulated from it (February 21, 2019) – STAT, Erin Trish, Dana Goldman

Indexing provision in HHS proposed marketplace regulations is not just bad policy, but could be vulnerable to legal challenge (February 14, 2019) – USC-Brookings Schaeffer on Health Policy blog, Jason Levitis

Even if it survives the courts, Obamacare needs help (January 28, 2019) – The Hill, Tom Priselac, John Romley

Testimonies

Medicare physician payment reform after two years: Examining MACRA implementation and the road ahead (May 8, 2019) – Testimony to the Senate Finance Committee, Matthew Fiedler


Joint recommendations of Brookings and AEI scholars to reduce health care costs (March 1, 2019) – Senate HELP letter, Henry Aaron, Loren Adler, Joseph Antos, James Capretta, Matthew Fiedler, Paul Ginsburg, Benedic Ippolito, Alice Rivlin

Testimony on Texas v. U.S.: The Republican lawsuit and its impacts on Americans with pre-existing conditions (February 6, 2019) – Testimony to the House Energy and Commerce Subcommittee on Health, Christen Linke Young

Looking Forward

Policy 2020 (a special section on the Brookings Institution website)

Late in 2019, Brookings launched “Policy 2020” in an effort to unpack the issues shaping the election. Christen Linke Young and Matthew Fiedler provided several pieces of content for the site debut, including a podcast, The Biggest Health Care Issues of the 2020 Election, and an overview of current debates in health policy.
Conclusion

2016-2019 OUTPUTS

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Since its launch in 2016, the USC-Brookings Schaeffer Initiative for Health Policy has established itself as a valuable resource to federal and state policymakers and media on a wide range of health policy issues, playing an important role in the continuing debate on U.S. health care reform. Building on work from the first few years of this unique partnership, the Initiative has successfully expanded its reach and impact on the health policy challenges facing the nation.

The USC-Brookings Schaeffer Initiative for Innovation in Health Policy was established through a generous gift from Leonard D. Schaeffer. The Initiative also gratefully acknowledges support from Brookings and the Schaeffer Center at the University of Southern California.

Opportunities to help fund the expansion of the Initiative’s reach and impact are available. These opportunities include support for:

- Operations and research
- Post-doctoral associates
- Data access
- Outreach efforts to policy and research communities, media, and the public

With health care evolving at an unprecedented pace, the work of the Schaeffer Initiative has the potential to inform elected officials with evidence-based, thoughtful approaches to today’s greatest health and health care challenges.

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