The Health Insurance and Managed Care (B) Committee met Aug. 11, 2022. During this meeting, the Committee:

1. Adopted its Spring National Meeting minutes.

2. Adopted the report of the Consumer Information (B) Subgroup, which has not met as a group since March 22. However, the Subgroup chair and a few Subgroup members:
   A. In June, decided to conduct focus groups with a small number of states to gather information on consumer engagement strategies they have used and which ones they find effective. The first focus group completed its work June 13, and the second focus group completed its work July 8.
   B. Are working to prepare summaries of the focus groups. They expect to identify themes from the focus groups and share them with the full Subgroup and interested parties within the next few months.

3. Adopted the report of the Health Innovations (B) Working Group, which met Aug. 10 and took the following action:
   A. Adopted its Spring National Meeting minutes.
   B. Heard a presentation on the Colorado Option Section 1332 waiver.
   C. Heard presentations from health plans on programs to improve access for historically underserved communities as part of its charge from the Special (EX) Committee on Race and Insurance to evaluate mechanisms to resolve disparities through improving access to care.
   D. Heard a presentation from the federal Centers for Medicare & Medicaid Services (CMS) on programs to improve access.
   E. Discussed a draft memorandum to the Special (EX) Committee on Race and Insurance related to the work the Working Group has completed to date for two of the charges received from the Special Committee.

4. Adopted the report of the Health Actuarial (B) Task Force.

5. Adopted the report of the Regulatory Framework (B) Task Force.

6. Adopted the report of the Senior Issues (B) Task Force.

7. Heard a panel presentation on efforts to create state-based health insurance exchanges and why states should establish them.

8. Heard a discussion on Medicaid redeterminations following the end of the COVID-19 public health emergency (PHE). The presentation provided an overview of the PHE, including the authorities at play
in the COVID-19 pandemic at the federal and state level. The presentation also highlighted important
dates state insurance regulators need to keep in mind related to the end of the PHE. The presentation
discussed 10 fundamental actions for states to prepare for the unwinding at the end of the PHE,
including creating a comprehensive state unwinding operational plan and coordinating with partners,
including state, tribal, and state and federal government partners.

9. Heard an update from the federal Center for Consumer Information and Insurance Oversight (CCIIO)
on recent activities of interest to the Committee. The update focused on what the CCIIO is doing to
prepare for the eventual end of the COVID-19 public health emergency (PHE) and the Medicaid
redetermination process.

10. Heard a federal legislative and regulatory update, including an update on federal No Surprises Act
( NSA) implementation.

11. Received an update on the Pharmacy Benefit Manager Regulatory Issues (B) Subgroup’s work.

12. Received an update on the Special (EX) Committee on Race and Insurance Workstream Five’s work.