

*2022 Spring National Meeting  
Portland, Oregon*

**REGULATORY FRAMEWORK (B) TASK FORCE**

Wednesday, August 10, 2022

11:30 a.m. – 1:00 p.m.

**Meeting Summary Report**

The Regulatory Framework (B) Task Force met Aug. 10, 2022. During this meeting, the Task Force:

1. Adopted its Spring National Meeting minutes.
2. Adopted the report of the Accident and Sickness Insurance Minimum Standards (B) Subgroup, including its July 11, June 13, June 6, May 9, and April 18 minutes. During these meetings, the Subgroup took the following action:
  - A. Discussed the comments received on Section 8B—Hospital Indemnity or Other Fixed Indemnity Coverage of the *Model Regulation to Implement the Accident and Sickness Insurance Minimum Standards Model Act* (#171) and its drafting note to clarify what is and is not “fixed indemnity coverage.”
  - B. Developed a chair draft of proposed revisions to Section 8B based on the comments received and discussion.
  - C. Discussed the chair draft of proposed revisions to Section 8B and agreed on preliminary revisions to Section 8B for inclusion in the draft of revisions to Model #171.
  - D. Discussed the comments received on the NAIC consumer representatives’ initial comments on Section 8C—Disability Income Protection Coverage and agreed on preliminary revisions to Section 8C for inclusion in the draft of revisions to Model #171.
3. Adopted the report of the Employee Retirement Income Security Act (ERISA) (B) Working Group, which met Aug. 10 and took the following action:
  - A. Adopted its May 24 minutes, which included the following action:
    - i. Adopted a summary of the *Rutledge v. Pharmaceutical Care Management Association (PCMA)* case for inclusion in the *Health and Welfare Plans Under the Employee Retirement Income Security Act: Guidelines for State and Federal Regulation* (ERISA Handbook).
  - B. Heard an update from the U.S. Department of Labor (DOL).
  - C. Discussed updating the NAIC Chart on Multiple Employer Welfare Arrangement (MEWA)/Multiple Employer Trust (MET) and Association Plans.
  - D. Discussed whether the ERISA Handbook needs to be reviewed for outdated information.
  - E. Adjourned into regulator-to-regulator session, pursuant to paragraph 2 (pending investigations), paragraph 3 (specific companies, entities or individuals) and paragraph 8 (consideration of strategic planning issues) of the NAIC Policy Statement on Open Meetings, to continue work on its goals.

4. Adopted the report of the Mental Health Parity and Addiction Equity Act (MHPAEA) (B) Working Group. The Working Group will meet Aug. 11. During this meeting, the Working Group plans to take the following action:
  - A. Adopt its Spring National Meeting minutes.
  - B. Hear an expert presentation on parity issues.
  - C. Hear presentations from providers on parity issues.
  - D. Meet in regulator-to-regulator session, pursuant to paragraph 8 (consideration of strategic planning issues) of the NAIC Policy Statement on Open Meetings, to continue work on its goals.
5. Adopted the report of the Pharmacy Benefit Manager Regulatory Issues (B) Subgroup, which met Aug. 9 and took the following action:
  - A. Adopted its July 29, June 15, April 25, and Spring National Meeting minutes, which included the following action:
    - i. Heard presentations from various stakeholders on issues from their perspective on the Subgroup's 2022 charge to develop a white paper to: 1) analyze and assess the role pharmacy benefit managers (PBMs), pharmacy services administrative organizations (PSAOs), and other supply chain entities play in the provision of prescription drug benefits; 2) identify, examine, and describe current and emerging state regulatory approaches to PBM business practices, such as price transparency and reporting requirements; rebating; and spread pricing, including the implications of the *Rutledge vs. PCMA* decision on such business practices; and 3) discuss any challenges, if any, the states have encountered in implementing such laws and/or regulations.
  - B. Heard a presentation from the Pharmaceutical Care Management Association (PCMA).
  - C. Heard a presentation from the Pharmaceutical Research and Manufacturers of America (PhRMA).
  - D. Heard a presentation from the Oregon Primary Care Association (OPCA).
6. Heard an update from the Center on Health Insurance Reforms (CHIR) on its work on various projects of interest to the Task Force. The CHIR is researching public option plans and recently published an in-depth analysis of Colorado's federal Affordable Care Act (ACA) Section 1332 waiver for a public option-style plan. The CHIR recently published a brief on the efforts California's state-based insurance marketplace is trying to reduce the number of uninsured and underinsured. The CHIR also recently published a brief on actions state insurance regulators can take to prepare for the post-public health emergency (PHE) Medicaid unwinding. Another issue the CHIR is analyzing is abortion and contraceptive coverage after the recent U.S. Supreme Court ruling in *Dobbs v. Jackson Women's Health Organization*. The CHIR is continuing to monitor and analyze state action related to health equity. It recently published a report entitled, "Improving Race and Ethnicity Data Collection: A First Step to Furthering Health Equity Through SBMs." The CHIR is also continuing its work related to the implementation of the federal No Surprises Act (NSA). The CHIR plans to release a study on state laws related to surprise billing enacted since the enactment of the NSA. The CHIR recently completed a study comparing the federal and state network adequacy standards governing Medicaid and ACA marketplace plans in six states. The CHIR's future work includes: 1) publishing an issue brief on state efforts to enforce the MHPAEA; and 2) a 50-state research project on medical debt consumer protections.

7. Heard a presentation from the Association for Accessible Medicines (AAM) on the usage of the term “interchangeable biosimilar product” in the *Health Carrier Prescription Drug Benefit Management Model Act* (#22) and its effect on prescription drug substitutions. The Task Force decided to form an ad hoc group consisting of a few Task Force members to study this issue and report back to the Task Force at or prior to the Fall National Meeting regarding next steps.
8. Heard an update on the implementation of the federal network adequacy standards for qualified health plans (QHPs) in the federally facilitated health insurance exchanges.