The Health Insurance and Managed Care (B) Committee met March 23, 2023. During this meeting, the Committee:

1. Adopted its 2022 Fall National Meeting minutes.

2. Adopted the report of the Consumer Information (B) Subgroup, including its Feb. 2 minutes, which included the following action:
   A. Adopted its Jan. 31 minutes, which included the following action:
      i. Discussed the results of a survey of states’ consumer engagement activities.
   B. Discussed its potential activities for 2023.

3. Adopted the report of the Health Innovations (B) Working Group, which met March 22 and took the following action:
   A. Adopted its 2022 Fall National Meeting minutes.
   B. Heard presentations on work and recommendations related to essential health benefits (EHBs) from the Colorado Division of Insurance, the National Health Law Program (NHeLP), and America’s Health Insurance Plans (AHIP).
   C. Discussed potential topics for future meetings, including telehealth services and adjustments to the premium load attributable to cost-sharing reductions.

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 discussion on the Kaiser Family Foundation (KFF) issue brief, “Claims Denials and Appeals in ACA Marketplace Plans in 2021.” The presenters discussed what the data could mean and its limitations, whether the federal Centers for Medicare & Medicaid Services (CMS) use it as part of its regulatory oversight responsibilities, and its potential future uses.

8. Heard a discussion of a state “checklist” of actions related to the Medicaid unwinding process provided in the State Health and Value Strategies’ (SHVS’s) issue brief, “Secrets to a Successful Unwinding: Actions State-Based Marketplaces and Insurance Departments Can Take to Improve Coverage Transitions.”
9. Heard an update from the federal Center for Consumer Information and Insurance Oversight (CCIIIO) on recent activities of interest to the Committee, including activities related to the Medicaid unwinding process as a result of the ending of the COVID-19 public health emergency (PHE), the implementation of the federal No Surprises Act (NSA), its new plan management certification modernization project, its health equity initiatives, and the soon to be finalized Notice of Benefit and Payment Parameters 2024 proposed rule.