Meeting Summary Report

The Regulatory Framework (B) Task Force met March 22, 2023. During this meeting, the Task Force:

1. Adopted its 2022 Fall National Meeting minutes.

2. Adopted the report of the Accident and Sickness Insurance Minimum Standards (B) Subgroup, including its March 13, Feb. 27, and Feb. 13 minutes. During these meetings, the Subgroup took the following action:
   A. Discussed the comments on Section 8A—Supplementary and Short-Term Health Minimum Standards for Benefits of the Model Regulation to Implement the Accident and Sickness Insurance Minimum Standards Model Act (#171).
   B. Completed its review of Section 8A.
   C. Discussed the comments on Section 7—Prohibited Policy Provisions.
   D. Discussed its upcoming work to review the remaining provisions in Model #171 in the following order: i) the remainder of Section 8, including revisiting the proposed new subsection on short-term, limited-duration (STLD) plans to discuss the Feb. 24 comments received on that section; ii) Section 7—Prohibited Policy Provisions; iii) revisit Section 5—Definitions and Section 6—Policy Definitions to reconcile any inconsistencies that may have arisen after the Subgroup’s review of the substantive provisions of Model #171; and iv) Section 9—Required Disclosure Provisions.

3. Adopted the report of the Employee Retirement Income Security Act (ERISA) (B) Working Group. The Working Group has not met in open session since the 2022 Summer National Meeting but is continuing its work to update the NAIC chart on multiple employer welfare arrangements (MEWA)/multiple employer trust (MET) and association plans and surveying the states regarding their stop-loss laws in relation to level-funded plans.

4. Adopted the report of the Mental Health Parity and Addiction Equity Act (MHPAEA) (B) Working Group, which will be meeting March 23. During this meeting, the Working Group plans to take the following action:
   A. Adopt its Feb. 24 minutes, which included the following action:
      i. Adopted its 2022 Fall National Meeting minutes.
      ii. Heard a discussion of parity issues with health insurers.
   B. Hear a discussion of the Wit v. United Behavioral Health case.
   C. 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 March 22 and took the following action:
   A. Adopted its 2022 Fall National Meeting minutes.
   B. Heard an update on pharmacy benefit manager (PBM)-related federal legislative and regulatory activities.
   C. Heard an update on PBM-related litigation.
   D. Heard a discussion on pending and recently enacted state laws regulating PBMs and their business practices.

6. Heard an update from the Center on Health Insurance Reforms (CHIR) on its work on various projects of interest to the Task Force. In light of the upcoming end of the public health emergency (PHE) and the resulting Medicaid unwinding process, the CHIR recently released an issues brief “Secrets to a Successful Unwinding: Actions State-Based Marketplaces and Insurance Departments Can Take to Improve Coverage Transitions.” The CHIR has taken on a few projects related to enrollment, including an analysis of state-based marketplace (SBM) outreach strategies for boosting health plan enrollment of the uninsured and the process of implementing the family glitch fix on the federal Affordable Care Act’s (ACA’s) marketplaces. The CHIR also is examining state activities, such as those occurring in Washington and Nevada, related to public option programs. The CHIR plans to continue monitoring these activities and new state public option legislation. The CHIR is examining what states are doing to improve coverage and recently released a few issue briefs highlighting state efforts in this area. The CHIR is continuing to monitor and analyze state action related to health equity. As part of this effort, the CHIR plans to publish soon a survey of SBMs’ language access and policy practices. The CHIR continues to monitor the implementation of the federal No Surprises Act (NSA) and expects to issue publications soon on several issues related to the implementation process, including a one-year progress report. The CHIR recently launched a four-part series studying employer-sponsored insurance (ESI) and cost containment. The CHIR’s future work in this area includes investigating cost containment and outpatient facility fees. Another future CHIR project is a 50-state survey on state protections against medical debt.