

## MEMORANDUM

To: SHOP Administrator and Participating Carriers

From: MHBE SHOP

Date: December 7, 2017

Re: 2018 SHOP Reconciliation Process (final)

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### SUMMARY

Overview of the monthly SHOP Reconciliation Process between the SHOP Administrator (BenefitMall) and the participating carriers. Overview of the quarterly SHOP Audit by Maryland Health Benefit Exchange.

### RECONCILIATION PROCESS BETWEEN THE SHOP ADMINISTRATOR AND THE ISSUERS

1. MHBE intends that a full monthly reconciliation will be active between the issuers and the SHOP Administrator beginning January 1, 2018. Until such time, MHBE requests that current reconciliation efforts continue between the issuers and BenefitMall.
2. Beginning January 1, 2018, the SHOP Administrator will reconcile their SHOP enrollment and billing data on a monthly basis with the participating SHOP carriers.
3. By the 15<sup>th</sup> of each month, the issuers will send a MDSHOP Reconciliation File to BenefitMall at the method decided between the parties.
4. BenefitMall will respond to the carrier's reconciliation file by template of the MD SHOP Discrepancy File within two weeks from carrier report receipt date.
5. The issuers will respond to BenefitMall's Discrepancy File within ten days from the date the discrepancy report returned. The discrepancies found would be presented at field level to the issuers.
6. The following file naming conventions will apply.
  - A. MD SHOP Reconciliation File
    - i. **Format:** File type - Sending party - Receiving party - File Date - sequence number
    - ii. **Sample:** MDSHOP-RECON\_CARRIERNAME\_\_BMSHOP\_YYYYMMDD\_1
  - B. MD SHOP Discrepancy File
    - i. **Initial Response from BenefitMall to Issuer**
      - a. **Format:** File type - Sending party - Receiving party - File Date - sequence number
      - b. **Sample:** MDSHOP-DISCREP\_BMSHOP\_CARRIERNAME\_\_YYYYMMDD\_1
    - ii. **Carrier Response from Issuer to BenefitMall**
      - a. **Format:** File type - Sending party - Receiving party - File Date - sequence number
      - b. **Sample:** MDSHOP-DISCREP\_CARRIERNAME\_\_BMSHOP\_YYYYMMDD\_1
    - iii. Future Exchanges would change the ending sequence number
7. This reconciliation will consist of comparison of all data points of demographics, enrollment and billing will be based upon the data found in the template MDSHOP Reconciliation File.
8. The data points compared should include but are not limited to:
  - A. Demographic information of employee – name, address, date of birth and social security number
  - B. Family Composition and their demographic information
  - C. Plan Choice
  - D. Premium Amount
  - E. Effective Dates

9. The format of the Discrepancies Report from BenefitMall will contain fields as described in the attached MD SHOP Discrepancy Report template.
10. Standard description and error codes are contained within the two template.
11. The SHOP Administrator and Carrier should resolve any discrepancy within 30 days of the determination of the discrepancy.
12. The SHOP Administrator and the participating carriers will notify MHBE SHOP should there be any unresolved reconciliation issues following that 30 day period.
13. The dispute resolution process can be conducted by the SHOP Administrator or carrier by contacting Maryland SHOP via a secure email at [mhbe.shop@maryland.gov](mailto:mhbe.shop@maryland.gov) with a copy of the discrepancy report with any unresolved issues as well as details on the dispute being reported. Emails sent to this email address should be titled **Dispute MD SHOP Reconciliation -(insert carrier's name)**.
14. BenefitMall will provide a copy of the issuer's reconciliation report and their respective responding discrepancy report to MHBE via a secure email to [mhbe.shop@maryland.gov](mailto:mhbe.shop@maryland.gov). MHBE SHOP should be copied in communications including reconciliation and discrepancy reports between the issuers and the carriers on a monthly basis.