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To: Issuers Participating on Maryland Health Connection

From: Maryland Health Benefit Exchange (MHBE) – Policy & Plan Management

Date: May 1, 2024

Re: Escalated Cases Guidance

Per MHBE's Carrier Reference Manual, carriers are to engage in an escalation process with MHBE in order to achieve timely resolution for enrollment escalation cases. This process utilizes the Carrier Interchange, weekly or biweekly calls, and any other measures deemed necessary to main efficiency for resolving enrollment escalations. The following processes are meant to ensure escalated enrollment cases are being resolved in the most effective and timely manner.

- Enrollment discrepancies should be initiated by the carrier for MHBE review or by MHBE for carrier review via the Carrier Interchange.
- A response via the Carrier Interchange is expected by the receiving party no more than five business days after a case is initiated.
- All tasks that follow after a case is initiated require a response no more than two business days after the task is created.
- The goal is to resolve and close escalated cases no more than seven business days from the date initiated.
- Cases not resolved within this time frame will be scheduled for discussion on MHBE's established escalated cases call it conducts with carriers on a weekly or biweekly basis.
- Carriers should not direct non-payment terminations to MHC call center or MHBE for resolution. Barring an enrollment error or carrier error, non-payment terminations are not eligible for reinstatement.
- Due to urgency and time constraints, carriers should prioritize resolution for cases marked as appeals. Appeals cases need to be resolved sooner than the standard seven business days. MHBE notes appeals cases in the carrier interchange.
- Both entities should coordinate as needed to achieve these best practices.