

## Maryland Health Connection Commission FAQ

### **Q: I am authorized on exchange, now what?**

A: Commissions are a contractual matter between the broker & the carrier. MHBE is not a party to this contract. In order to get paid commission, you **must** also be appointed with a carrier. To become appointed with a particular QHP issuer, you should:

- Contact the QHP issuer directly or work with a general agency who has an appointment with a QHP issuer, and
- Work with your affiliated issuers to determine how commissions will be paid based on the NPN included on the enrollment transaction (known as the “834”).

Below are the points of contact for becoming appointed with each carrier, along with any contracting requirements that have been provided to MHBE by the carrier.

#### **Aetna** *\*Please note – Aetna is leaving the Marketplace effective 12/31/2025.*

Broker compensation:

Phone: 800-622-3435 (TTY: 711)

Email: [BrokerComm@Aetna.com](mailto:BrokerComm@Aetna.com)

Licensing and appointment:

Phone: 866-511-2863

Email: [LAAU@aetna.com](mailto:LAAU@aetna.com)

#### **CareFirst**

Contracting Requirements:

Request contracting requirements from [BCCContracts@carefirst.com](mailto:BCCContracts@carefirst.com)

#### **Alpha Dental and Delta Dental**

Contracting Requirements:

- <https://www.deltadentalins.com/brokers/>

Point of Contact:

Producer Services

(866) 760-4080

[Producerservices@delta.org](mailto:Producerservices@delta.org)

**Dominion Dental**

Point of Contact:

Contracting Requirements:

- To request a broker kit, please call Dominion Dental's Group Service Center at 877-559-9624 or send an email to [gsc@DominionDental.com](mailto:gsc@DominionDental.com)

Melissa Guffey, Manager Regulatory Affairs

(703) 212-3506

[mguffey@dominionnational.com](mailto:mguffey@dominionnational.com)

**Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.**

Contracting Requirements:

Point of Contact:

Broker Shared Service Center

(844) 268-2943

[BrokerSupport-MAS@kp.org](mailto:BrokerSupport-MAS@kp.org)

What you need to know about broker compensation, our enhanced support, getting appointed with Kaiser Permanente, and more:

[Working With Us | Kaiser Permanente \(kp.org\)](#)

**UnitedHealthcare**

For broker and agent contracting:

- Agent Lifecycle Management - Agent Onboarding  
[exchangescontracting@uhc.com](mailto:exchangescontracting@uhc.com)
- For general inquiries from brokers and agents:  
Producer Help Desk – Broker Support (866) 235 -4095  
[acabrokersupport@uhc.com](mailto:acabrokersupport@uhc.com)

Point of Contact:

Christina Stafford, Exchange Program Manager

[christina\\_c\\_stafford@uhc.com](mailto:christina_c_stafford@uhc.com)

Ed Shepherd- Agency Manager- N.E. Region

(540) 283-1561

[edward\\_shepherd@uhc.com](mailto:edward_shepherd@uhc.com)

**VSP**

<https://www.individualbrokervision.com/>

**Wellpoint**

[producers@elevancehealth.com](mailto:producers@elevancehealth.com)

877-304-6470

**Q: How can I ensure that my NPN was sent over on the 834 and that I am listed as the Broker of Record?**

A: In order to be sent as the Broker of Record on the 834 to the carrier, you must complete the Tango. (Please see instructions in the Broker Portal Guide.)

**Q: Do I need to send the BOR form from a carrier's website to MHBE?**

A: No. Please refrain from sending the BOR form. This potentially exposes consumer PII. (Please see your Non-Exchange Entity Agreement for information regarding your responsibility with protecting consumer PII.) As long as the Tango was completed, your BOR information will be sent.

**Q: Yesterday I assisted a consumer, but I didn't complete the Tango process until today? What do I need to do?**

A: Nothing. Change in BOR will trigger a new 834 transaction to the carrier with updated BOR information.

**Q: How can I make sure that I am Tango'd with a consumer?**

A: If the consumer appears in your "My Clients" list in your broker portal, then the Tango was completed successfully.

**Q: Do I get paid commission for Medicaid enrollments?**

A: There is no commission payment for Medicaid enrollments. Brokers should refer Medicaid eligible consumers to the navigator program or to the call center. If some members of the household are eligible for a QHP and others are eligible for a Medicaid program (split household), enrollment for both programs should be completed.

**Q: I'm not getting paid for a particular consumer – what should I do?**

A: Contact the carrier. Commissions are a contractual matter between the broker & the carrier.

**Q: The carrier says they do not have me listed as the BOR for a particular consumer – what should I do?**

A: Follow your escalated cases guide to securely escalate your case using the Commission escalation path. This will ensure that the case is sent without exposing consumer PII. **Do not** email Broker Operations directly.

**Q: Will I get paid differently for SEP enrollments vs. new enrollments?**

A: No. Arrangements that pay reduced (or no) commissions and other forms of compensation to agents and brokers who assist consumers with enrollment in individual market coverage during an SEP and pay higher amounts for enrollments completed during the Open Enrollment period for the same benefit year violate the guaranteed availability provisions of the Affordable Care Act.

**Q: Where can I get my Letter of Authorization?**

A: The Letter of Authorization is emailed to you when you become authorized, or when you complete your renewal application. If you are unable to locate this email, you can access your Letter of Authorization within your latest approved broker application by selecting “Authorization Letter Preview & Download.”

**Q: How can I change my GA?**

A: You can update your latest approved broker application. (Please see the Job Aid to Update Approved Application.)