

Notice to Evergreen Health Group Administrators September 1, 2017

On August 31, 2017, the Receiver for Evergreen Health filed a motion in the Baltimore City Court asking the court to liquidate Evergreen Health. After review of the Receiver's motion, the Circuit Court for Baltimore City entered an order on September 1, 2017 ordering the liquidation of Evergreen Health. The order contains significant provisions that require the immediate attention of Evergreen Health Group Administrators. Those provisions include the following:

- All Evergreen Health policies are cancelled as of 11:59 PM on September 30, 2017
- A provision for a special open enrollment period for Evergreen Health policyholders from September 1, 2017 to September 30, 2017.
- The open enrollment period will include the following HMOs:
 1. CareFirst BlueChoice, Inc.
 2. Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.
 3. Aetna Health Inc.
 4. Optimum Choice, Inc.

The above HMOs have agreed that any coverage purchased and paid for by an Evergreen Health group during this open enrollment will have a retroactive effective date of September 1, 2017. The above HMOs have also agreed to waive any participation requirements for Evergreen Health members for the thirty (30) day enrollment period. This waiver only applies to the enrollment period referenced in this Order and does not apply at the subsequent renewal, at which time all applicable carrier requirements will apply.

The Receiver will issue refunds to any group for September premium paid for Evergreen Health coverage, if the group has obtained by September 30, 2017 replacement coverage effective September 1, 2017.

The Receiver asked the court to order that, during the open enrollment period, all Evergreen Health providers shall accept Evergreen Health evidence of insurance from Evergreen Health members and should submit claims during the enrollment period to Evergreen Health. Such claims will be processed at the amounts allowed by the member's new carrier, or by Evergreen if no new carrier has been selected by the end of the enrollment period.

The Receiver will go back to the Court in the near future to establish a claims filing deadline and claims procedure.

All Group Administrators are encouraged to begin the process of transitioning their group to new health insurance coverage as soon as possible. Additional information will be posted to the Evergreen Health website at: www.evergreenmd.org