

Notice to Evergreen Health Providers
September 6, 2017

PLEASE READ FOR IMPORTANT CLAIMS FILING INFORMATION

On August 31, 2017, the Receiver for Evergreen Health (Evergreen) filed a motion in the Baltimore City Court asking the Court to liquidate Evergreen. The motion of the receiver was granted and the Court issued its order on September 1, 2017. Due to the current financial state of Evergreen, the Receiver asked the Court to cancel all Evergreen policies as of 11:59 p.m. September 30, 2017.

In an effort to provide options for Evergreen members, the Receiver also asked for authorization for a special thirty day open enrollment for Evergreen groups starting September 1, 2017 and ending September 30, 2017. As ordered by the Court, the open enrollment will include the following Health Management Organizations (“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 group during this open enrollment will have a retroactive effective date of September 1, 2017. The Receiver will refund to groups any September premium paid for Evergreen coverage, if the group has obtained replacement coverage by September 30, 2017 that is effective September 1, 2017.

The Court’s order provides that, during the open enrollment period, all Evergreen providers must accept Evergreen evidence of insurance from Evergreen members. Continuity of care requirements still apply to all Evergreen providers.

Claims Processing Instructions:

In order to be able to process your claims in the most efficient manner, it is recommended that:

1. For claims with dates of service prior to September 1, 2017, providers should submit those claims to Evergreen.
2. For claims with dates of service in the month of September 2017, providers should do the following:

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- a. **If the provider has received notification from a new carrier**, please submit the claim directly to the new carrier. Claims will be processed at the reimbursement rate allowed by the new carrier.
- b. **If the provider has not received notification from a new carrier**, please hold those claims until October 1, 2017 and then submit those claims to Evergreen. These claims will be processed at the reimbursement rates allowed by Evergreen.

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

A copy of the Court order and additional information will be posted to the Evergreen Health website at: www.evergreenmd.org.

[If you have additional questions, please call Evergreen Health at Provider Relations at \(443\) 475-0105 or email providers@evergreenmd.org.](#)