Maryland's Appeals & Grievance Law
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External Review Process/State Appeals Programs

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The Health Insurance and Managed Care (B) Committee

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Background/History

• In 1998, the Appeals and Grievance Law was enacted by the Maryland General Assembly to provide a full and fair process for resolving disputes regarding the medical necessity of a proposed or delivered healthcare service.

• The Appeals and Grievance process begins when a carrier renders an "adverse decision," which includes a determination that a proposed or delivered healthcare service is not medically necessary, appropriate or efficient. The member, the member's representative, or the treating provider on behalf of the member has the right to protest this decision through the carrier's internal review process.

• When a protest is filed with the carrier regarding an adverse decision, this is a "grievance." If the carrier again determines the proposed or delivered healthcare service is not medically necessary, the member, the member's representative, or the treating provider on behalf of the member may ask the Maryland Insurance Administration to review the carrier's grievance decision by filing a "complaint."
How the law works

• The Appeals and Grievance Law gives the Administration the authority to contract with three Independent Review Organizations ("IROs") to review these medical necessity complaints. When the Administration sends a complaint to an IRO for review, and the IRO assigns an expert reviewer for the complaint, Maryland law requires that the reviewer be an unbiased provider in the same specialty as the area or areas appropriate to the subject of review.

• The Administration's final decision on the complaint may be based on the opinion of the IRO. If the complainant remains dissatisfied with the Administration's decision, he or she may make a written request for a hearing to challenge the Administration's decision. Carrier's do not have the right to an administrative hearing, but may file a petition for judicial review with the Circuit Court.
Quarterly Reports

The Appeals and Grievance Law also requires carriers to submit quarterly reports to the Maryland Insurance Commissioner about their adverse decisions and grievance decisions.

Specifically, carriers must provide to the Administration:
• The number of adverse decisions issued by the carrier;
• The outcome of each grievance filed with the carrier;
• The number and outcomes of cases that were considered emergency cases;
• The time within which the carrier made a grievance decision on all other cases that were not considered emergency cases;
• The number of grievances filed with the carrier that resulted from an adverse decision involving length of stay for inpatient hospitalization as related to the medical procedure involved; and
• The number and outcome of all other cases that resulted from an adverse decision involving the length of stay for inpatient hospitalization.
What the numbers show

• In 2021, the Maryland Insurance Administration's Appeals and Grievance Unit either reversed or modified the carrier's grievance decision 70.5 percent of the time. Meaning, that if a consumer filed a medical necessity complaint with the Administration's Appeals and Grievance Unit and the unit possessed jurisdiction over the complaint, there was a better than 70 percent chance that the denial would be reversed in the complainant's favor.

• Since the enactment of the Appeals and Grievance law, the Maryland Insurance Administration's Appeals and Grievance Unit has recovered over $12 million dollars for complainants.
How Consumers Contact the MIA

Filing a complaint with the Maryland Insurance Administration regarding a Medical Necessity denial or an Emergency Appeal can be done via the Administration's website. Also, if a consumer has been denied insurance coverage for medically necessary care or emergency appeal, they can call the Administration's 24/7 Hotline at 1-800-492-6116.

MEDICAL NECESSITY & EMERGENCY APPEALS
1-800-492-6116
insurance.maryland.gov
How the MIA is Improving Consumer Outreach

- Creation of a 24/7 Hotline marketing campaign
- Robust social media campaign promoting the 24/7 Hotline
- Consumer newsletter
- Various marketing materials, including:
  - First Aid Kit
  - Magnets
  - Flyers
- Podcast/Video production to promote 24/7 Hotline (YouTube Channel, Social Media, Website)
- Consumer education at outreach events, i.e. community events, fairs, libraries, motor vehicle administration, farmers markets
Enhanced Outreach Impact

Complaints Received
• 2021: 839 Complaints received
• 2022: 853 Complaints received
• 2023: More than 1,000 projected complaints

Consumer Questionnaire
Information received from complainants who completed a "Consumer Questionnaire" often indicate they learned about the Maryland Insurance Administration's Appeals and Grievance Unit through the Administration's website, a health care provider, a friend or family member, their insurance carrier, an outreach event, and/or through social media.
Next Steps

• Increase outreach to health care providers
• Enhance social media content
• Feature campaign in future podcast
• Produce additional video content
• Increase visibility of campaign in e-newsletter
• Distribute additional promotional items
Marketing Materials & Outreach
The Maryland Insurance Administration has developed specific Podcasts on the subject of "Medical Necessity & Emergency Appeals." Visit our YouTube playlist by clicking here.
Social Media Posts
Consumer Outreach Events

The Administration's Consumer Education and Advocacy Unit conducts multiple outreach events throughout the State of Maryland annually. View our upcoming events here.
The Maryland Insurance Administration has a dedicated webpage on the subject of "Medical Necessity & Emergency Appeals" which is available in Spanish and Korean.
Consumer Email Features

MEDICAL NECESSITY & EMERGENCY APPEALS
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Health Claim Denials

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Health Claim Denials

Did you know? The Maryland Insurance Administration has a Medical Necessity & Emergency Appeals hotline for anyone who has been denied insurance coverage for medically necessary care or emergency services.

- Medical Necessity and Emergency Appeals
- Inpatient / Outpatient Service Recaptions
- www.maih.gov

For the Medical Necessity & Emergency Appeals Hotline, you can contact us 24/7, 365 days a year for immediate help for insurance concerns involving physical care as well as mental health and substance use disorder care. Call us at 1-800-492-6116 or visit our website.

Part 1

Visit our website to watch our latest two part video series (also available on Apple podcast) on how to handle Health Claim Denials.

Part 2

For the Medical Necessity & Emergency Appeals Hotline, you can contact us 24/7, 365 days a year for immediate help for insurance concerns involving physical care as well as mental health and substance use disorder care. Call us at 1-800-492-6116.

If you decide to file an appeal, the Maryland Attorney General’s Health Education and Advocacy Unit will assist you, free of charge, in filing your appeal. The Health Education and Advocacy Unit may be reached toll-free at 1-888-281-5807.

Maryland Insurance Administration

http://insurance.maryland.gov
Contact Information

Maryland Insurance Administration

📞 800-492-6116 | 410-468-2000 | 800-735-2258 (TTY)
🌐 insurance.maryland.gov

MDInsuranceAdmin
en Español: MDInsuranceAdminES
Maryland Insurance Administration

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