

MHBE FY23 EXHIBIT H (and I) - Conflict of Interest Standard and Disclosure

ATTACHMENT F –CONFLICT OF INTEREST STANDARDS AND DISCLOSURE

This acknowledgement of Conflict of Interest Standards must be signed by an individual authorized to bind each organization that seeks Maryland Health Benefit Exchange (“MHBE”) authorization to operate in Maryland as a Connector Entity. Where a Connector Entity is a partnership of entities, as provided in Md. Code Ann., Ins. § 31-101(k), there is a Prime Entity/Grant Applicant (the “Prime Entity” or “Prime Applicant”), as well as one or more partner entities (the “Partner Entity” or “Partner” and, together with the Prime Entity, the “Connector Entity Partners”). All Prime Entities and partner entities must sign this acknowledgement in order for the related Connector Entity to be authorized. This form may be used by either a Prime Entity or a Partner Entity.

Name of Organization Applying/Acknowledging: _____

I. Conflict of Interest Standards

A. Neither the Connector Entity prime applicant nor any partner applicant can receive compensation from a carrier, insurance producer, Third Party Administrator, or Medicaid Managed Care Organization in connection with enrollment of individuals into Qualified HealthPlans, Medicaid, or the Maryland Medical Assistance Program or for enrollment in a non- Qualified Health Plan.

B. The Connector Entity partners shall only hire individual exchange navigators and assisters who are of good character and trustworthy.

C. The Connector Entity partners are prohibited from steering or otherwise encouraging individuals to enroll in a plan or product on a basis other than consumer or employer’s best interests.

II. Disclosure

A. The Connector Entity partners are required to disclose to MHBE any relationship they believe may be or may appear to be an actual or potential conflict of interest. Specifically, the Connector Entity partners must disclose all business relationships with carriers, even if those relationships are unrelated to plan enrollment and individual exchange navigator, assister or other non-certified personnel functions.

B. If an actual or potential conflict of interest currently exists or arises after the date of this attestation, the Connector Entity partner shall immediately make a full disclosure in writing to the MHBE Chief Compliance Officer of all relevant facts and circumstances. This disclosure shall include a description of actions which the Connector Entity partner has taken to avoid, mitigate, or neutralize the actual or potential conflict of interest.

I HEREBY WARRANT THAT I AM AUTHORIZED TO BIND THE ORGANIZATION NAMED ABOVE. I ACKNOWLEDGE THAT I HAVE READ THE CONNECTOR ENTITY CONFLICT OF INTEREST STANDARDS AND DISCLOSURE ATTESTATION AND I ATTEST THAT THE ORGANIZATION NAMED ABOVE, WHICH SEEKS AUTHORIZATION TO PARTICIPATE IN A CONNECTOR ENTITY AS A PRIME ENTITY OR PARTNER ENTITY, IS COMMITTED TO BE BOUND BY THE ABOVE MHBE CONNECTOR ENTITY CONFLICT OF INTEREST STANDARDS AND DISCLOSURE REQUIREMENTS.

Name of Organization (from above):

Name and Title of Authorized Representative (please print)

Signature: _____

Date: _____