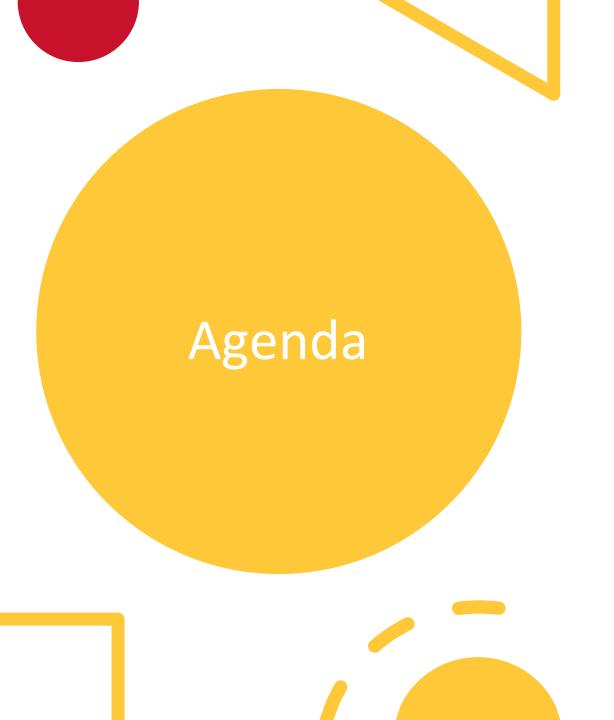


Phase 4 – Appeals

August 7, 2023



- Key Dates
- Appeals Considerations
- Public Comment
- Questions & Answers

Informal Regulatory Process Key Dates

Phase	Topics	Discussion Document Issued	Public Meeting	Draft Outline Issued	Draft Outline Comments Due
1	EPIPS	6/8/23	6/15/23	7/6/23	7/13/23
2	OSEP	6/22/23	7/6/23	7/20/23	7/27/23
3	Contributions	7/13/23	7/20/23	8/10/23	8/17/23
4	Appeals	7/27/23	8/7/23	8/17/23	8/24/23
5	Claims	8/11/23	8/21/23	9/5/23	9/12/23
6	Misc.	8/24/23	8/31/23	9/14/23	9/21/23

Statute

MD Code, Labor and Employment

§ 8.3-906 Appeals

- (a)(1)(i) The Secretary shall establish a system for appeals by covered individuals regarding determinations of benefit amounts, benefit durations, and denials of benefits under this title.
 - (ii) A covered individual must file an appeal under subparagraph (i) of this paragraph within 30 days after the determination is made or benefits are denied, unless good cause can be shown for the delay.
 - (2) The Secretary may use the procedures under § 8-806 of this article for the system required under paragraph (1) of this subsection.
- (b) Judicial review of any decision with respect to benefits under this title shall be allowed in a court of competent jurisdiction after an aggrieved party has exhausted all administrative remedies established by the Secretary under this title.
- (c) The Secretary shall implement procedures to ensure confidentiality of all information related to any claims filed or appeals taken to the maximum extent allowed by law.

Appeals Questions

- 1. Who might be able to request a review of a decision by the Division?
- 2. What decisions might be appealable?
- 3. Will State Plan claimants, OSEP claimants and EPIP claimants follow the same dispute resolution processes?
- 4. What rules should govern appeals hearings?
- 5. What might be the dispute resolution process for a State Plan claimant?

Appeals Questions

- 6. What might the dispute resolution process be for an EPIP claimant enrolled in a commercial plan?
- 7. Should EPIPs using a self-insured plan have a different process than EPIPs using a commercial plan?
- 8. What may the timeline requirements be for submitting an appeal request?
- 9. What might the process be if an employer EPIP Applicant or OSEP Applicant wants to appeal a denial of an application?
- 10. What might the process be if an OSEP or EPIP participant is denied a voluntary termination or issued an involuntary termination?

What rules should govern appeals hearings?

- How do we continue to meet our goal of centering user experience in program design?
- How do we balance traditional due process procedures (witnesses, subpoenas, precedent) with accessibility?
- Is there a model to look at?

EPIP Commercial Plan Appeals

- How do we reconcile the requirements of the Insurance Code with the requirements of Labor & Employment Code?
 - Timelines
 - Dispute resolution process
 - Concurrent jurisdiction

Self Insured EPIPS

- How do we fit self-insured EPIPS into this scheme if they are not regulated under the Insurance Code?
- At what point should a self-insured EPIP claimant be able to use the State dispute resolution process?

EPIP/OSEP Application Denial

- This has been the focus of numerous comments. Does the option presented address the concerns that have been submitted?
 - When an application is denied, the Division may issue a written decision to the employer listing the reasons for the denial.
 - The applicant may resubmit their application addressing the deficiencies in the application.
 - If the applicant believes their application was incorrectly denied, they may request a reconsideration by the Division.
 - The Division may issue a written response following a reconsideration.
 - The applicant may be able to cure any remaining deficiencies.

Housekeeping

Written Comments can be sent to: FAMLI.policy@maryland.gov

Upcoming Dates

- Phase 3 Contributions Outline August 10
- Phase 5 Claims Discussion Document August
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