KATHLEEN KENNEDY TOWNSEND LIEUTENANT GOVERNOR

DONNA B. IMHOFF DEPUTY COMMISSIONER

STATE OF MARYLAND MARYLAND INSURANCE ADMINISTRATION

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| | email: dimhoff@mdinsurance.state.md.us |
|---------------------------------|---|
| BULLETIN 02-13 | |
| | Insurers, Nonprofit Health Service Plans, Health Maintenance Organizations, and Third Party Administrators |
| | Request for Notice of Interest Maryland Health Insurance Plan |
| Date: | June 19, 2002 |
| ("Plan") for unit 2003. The Boa | 8, Chapter 153 of the Acts of 2002 established the Maryland Health Insurance Plan nsurable Maryland residents. The Plan will begin enrolling Maryland residents July 1, rd of Directors of the Plan will be contracting with an Administrator to administer the s of the Administrator are anticipated to include enrollment functions, claims processing, eview. |
| your company | rectors will be issuing a Request for Proposals for the Administrator in the near future. If is interested in further information regarding the Request for Proposals for the f the Plan, please complete the form at the bottom of this Bulletin and return it to this |
| | Donna B. Imhoff Deputy Commissioner |
| | NOTICE OF INTEREST |
| Company Name | : |
| Contact Name: | |
| Contact Telepho | one #: |
| Contact Address | S: |
| E-mail Address: | |

Please return this form to Brenda Wilson, Chief of Managed Care, Maryland Insurance Administration, 525 St. Paul Place, Baltimore, Maryland 21202.