

2021 Assessment Form Instructions
(Maryland Health Care Access Act of 2018)

Who should file? Any insurer, nonprofit health service plan, health maintenance organization, dental plan organization, fraternal benefit organization, or any other person subject to regulation by the State that provides a product that is subject to the fee under § 9010 of the Affordable Care Act and is subject to an assessment by the State, and, a managed care organization authorized under title 15, 1 subtitle 1 of the Health – General Article.

What is to be filed? Complete and return the attached Assessment Form reporting health and accident & health direct premiums written in Maryland during 2021, and remit payment by March 15, 2022. Nonprofit health service plans subject to the assessment should use premium tax exemption value from their March 1, 2022 report, subject to any exemptions or exclusions in the Maryland Health Care Access Act of 2018, to determine their assessment base.

Completed forms should be mailed to the attention of Philip Ermer, Executive Director Premium Tax and Company Licensing, at the following address: Maryland Insurance Administration, 200 Saint Paul Place, Ste. 2700, Baltimore, MD 21202, or emailed to Philip.Ermer@maryland.gov.

How are payments to be made? An assessment payment, separate from other premium tax payments, can be made by mailed check or ACH transfer to: Maryland Insurance Administration, 200 Saint Paul Place, Ste. 2700, Baltimore, MD 21202. If mailing a check, please mark “Health Care Assessment.” Alternatively, payment can be made through the NAIC OPT^{ins} website now available for Maryland premium tax payments.

Penalties and interest will be assessed for late payments or underpayments as set forth in Insurance Article, § 6-108, Annotated Code of Maryland.

Total Direct Written Premiums: Report the gross amount of all health and/or accident & health premiums reported in Maryland. The total should equal the company’s premiums reported in the 2018 annual statement filed with the NAIC and, in particular, the schedule referenced in Note 1 of the form. Amounts not reported in the Schedules referenced in Note 1 should be included on the additional line provided.

Excluded Premiums: Excluded premiums include those expressly set forth by federal law and regulation (see, for example, ACA § 9010(h)(3) and 26 C.F.R. §57.2) and premiums for federal programs not subject to assessment in Maryland. Excluded premiums should be specifically reported on the form in the column provided with a reference to the reported line of business on the schedule referenced in Note 1 from which it is deducted.

How is the assessment due calculated? Subtract the total excluded premiums from the total direct written premiums, and multiply the difference by 1.00%.

In addition to these instructions, please review § 6-102.1, Insurance Article, and Bulletin 18-16 for additional information.