



State of Connecticut

Insurance Department

P.O. Box 816
Hartford, CT 06142-0816
www.ct.gov/cid
(860) 297-3800

Third Party Administrator (TPA) Registration

(NOT FOR USE TO OBTAIN LICENSE)

Registration as a Third Party Administrator for firms pursuant to Section 31 of Public Act 11-58

Initial Registration Renewal Registration

Type of Entity: Corporation Partnership Association LLC Other

Legal Name of Applicant				Federal Tax #	
Contact Person Last Name		First Name		Middle	
Business Address (<i>Do not use PO Box</i>)			City	State	Zip
Mailing Address (<i>If different from business address</i>)			City	State	Zip
Business Phone	Ext.	Fax		State of Domicile	
Complaint Contact Person Last Name		First Name		Middle	
Business Address (<i>Do not use PO Box</i>)			City	State	Zip Code
Mailing Address (<i>If different from business address</i>)			City	State	Zip Code
Phone 1	Ext.	Phone 2	Fax	Email	
List of all employers for which your firm provides administrative services in the State of Connecticut. Please include the full name and address of each employer, and date your firm initiated administrative services.					
<u>NAME OF EMPLOYER</u>		<u>ADDRESS OF EMPLOYER</u>		<u>DATE SERVICES INITIATED</u>	
1.					
2.					
3.					
4.					
5.					
List all states in which each plan is doing business or covers individuals:					
1.					
2.					
3.					
4.					
5.					

Confirmation of registration will be emailed within 30 days of receipt of completed registration form
Registration expires on September 30 annually and re-registration using this form is required. No fees required.

Please select your registration type that applies:

- An employer administering its employee benefits plan or the benefit plan of an affiliated employer under common management and control;
- A union administering a benefit plan on behalf of its members;
- An insurer that is licensed in this state or is acting as an authorized insurer with respect to insurance lawfully issued to cover a Connecticut resident and sales representative thereof;
- An insurance producer who is licensed to sell life, annuity or health coverage in this state, whose activities are limited exclusively to the sale of insurance;
- A creditor acting on behalf of its debtors with respect to insurance covering a debt between the creditor and its debtors;
- A trust and its trustees, agents and employees acting pursuant to such trust established in conformity with 29 USC Section 186, as amended from time to time;
- A trust exempt from taxation under Section 501(a) of the Internal Revenue Code of 1986, or any subsequent corresponding internal revenue code of the United States, as amended from time to time, and its trustees and employees acting pursuant to such trust, or a custodian and the custodian's agents and employees acting pursuant to a custodian account that meets the requirements of Section 401(f) of the Internal Revenue Code of 1986, or any subsequent corresponding internal revenue code of the United States, as amended from time to time;
- A credit union or a financial institution that is subject to supervision or examination by federal or state banking authorities, or a mortgage lender, to the extent such credit union, financial institution or mortgage lender collects or remits premiums to licensed insurance producers or limited lines producers or to authorized insurers, in connection with loan payments;
- A credit card issuing company that advances or collects premiums or charges from its credit cardholders who have authorized collection;
- An attorney-at-law who adjusts or settles claims in the normal course of such attorney's practice or employment and who does not collect premiums or charges in connection with life, annuity or health coverage;
- An adjuster who is licensed in this state or is not subject to the licensure requirements of chapter 702 of the general statutes and whose activities are limited to adjusting claims
- An insurance producer who is licensed in this state and acting as a managing general agent, as defined in section 38a-90a of the general statutes, whose activities are limited exclusively to those specified in said section;
- A business entity that is affiliated with an insurer licensed in this state and that undertakes activities as a third-party administrator only for the direct and assumed insurance business of the affiliated insurer;
- A consortium of federally qualified health centers funded by the state, providing services only to the recipients of programs administered by the Department of Social Services;
- A pharmacy benefits manager registered under section 38a-479bbb of the general statutes;
- An entity providing administrative services to the Health Reinsurance Association established under section 38a-556 of the general statutes; or
- A nonprofit association or one of its direct subsidiaries that provides access to insurance as part of the benefits or services such association or subsidiary makes available to its members.

Registrant Attestation and Certification

I certify that, under penalty of perjury, I am the person named herein and know the contents thereof, and that all of the information submitted in this application is true and complete. I attest that I have the authority and capacity to execute this certification on behalf of the registrant. I am aware that submitting false information or omitting pertinent or material information in connection with this registration is grounds for denial of registration.

Name of Registrant:

Name of Authorized Submitter:

Title:

Phone:

Date:

Additional Comments:

* After you complete the form, save it and send back to us as attachment to cid.tpa@ct.gov