

Kansas Third Party Administrator Annual Report

Report and all required documents are due on or before July 1st of every year. (Report does not apply to Self-Funded TPA's)

The Annual Report form, \$100 filing fee and the Background Information listed below are to be submitted through the SBS for Organizations site. The Report form and supplemental documents should be uploaded through the SBS for Organizations program in one report submission. Please note there are additional filing fees for items submitted after the initial submission.

Company Name:

DBA Name:

FEIN:

Business Address:

Mailing Address:

Business Phone:

Business Email:

Contact Person:

Title:

Contact Phone:

Contact Email:

Annual Report submitted should include the following –

-Annual Report Form

-\$100 Annual Report Fee – submitted electronically through SBS for Organizations

-List of Insurers/Self-Funded Plans the administrator had agreements with during the preceding fiscal year. The separate PDF list should include the following:

Insurance Company Name (or Employer or Trust Name)

NAIC#

Address

Contract Telephone Number

Number of Kansas residents covered by plan

In addition, on the same PDF form, please provide responses to the following -

Does the administrator administer, or will be administering, self-funded health plans subject to regulation under K.S.A. 40-3810? If applicable - is your stop-loss carrier admitted for business in Kansas? Please provide the name of the stop-loss carrier(s) utilized.

-Audited Financial State Requirement – K.S.A. 40-3814

-An audited financial statement for the previous fiscal year is a requirement of the Annual Report. If submitting a "consolidated" audited statement, the statement must include an itemized breakdown of the TPA entity specific to comply with K.S.A. 40-3814(b).

-If negative equity is reported in the audited statement, additional explanatory reporting and/or financial information is required to be included in the Report which explains the deficit and supports financial soundness.

-K.S.A. 40-3814(2) permits the Commissioner to grant a hardship exemption from filing the required audited financial statements and allow the submission of unaudited financial statements. Please see the "Third Party Administrator Hardship Exemption" form on our website for application procedures as well as information that would be required if an exemption was approved, including securing, and maintaining a surety bond for the greater of 10% of funds handled for the benefit of Kansas residents or \$20,000.

Background Information

Please read and answer the following questions:

YES NO

1. Has there been any administrative action taken against the administrator in another jurisdiction or by another governmental agency within the last year?

If you answer yes, please provide the following:

- a. a copy of the order,
- b. consent order, and
- c. other relevant legal documents.

2. Has any owner, partner, officer or director been involved in an administrative proceeding regarding any professional or occupational license within the last year?

If you answer yes, please provide the following:

- a. a written statement identifying the type of license and explaining the circumstances of each incident,
- b. a copy of the Notice of Hearing or other document that states the charges and allegations, and

YES NO

- c. a copy of the official document which demonstrates the resolution of the charges or any final judgment.

3. Has there been a change of officers within the last year?

If you answer yes, please provide the following:

- a. a list of the new officers and their position.

Officers Verification

The report must be verified by at least two (2) officers of the administrator

Annual Report for the fiscal year ending: _____

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement is in full and true answered of all the assets and liabilities of the condition and affairs of the said reporting entity as of the reporting period stated above and of its income and deductions therefrom for the period ended and have been completed in accordance with the Generally Accepted Accounting Principles according to the best of their information, knowledge and belief, respectively.

The undersigned owner, partner, officer or director of the applicant hereby certifies, under penalty of perjury, that all of the information submitted in this reporting and attachments is true and complete and I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license revocation and may subject me and the applicant to civil or criminal penalties as determined by a court of law.

Signature

Date

Printed Name

Title

Signature

Date

Printed Name

Title

By typing your name above, you are signing this form electronically. You agree that your electronic signature is the legal equivalent of your manual signature on this form.

