# Third Party Administrator (TPA) License Application Submission Instructions Life & Health Division North Carolina Department of Insurance

## The NCDOI accepts TPA License Applications, both Initial and Renewal, through CITRIX ShareFile.

CITRIX ShareFile is a secure, cloud based way to exchange and track large files. It will allow the NCDOI to seamlessly collaborate with our TPA Clients via an easy-to-use client portal. The NCDOI will be able to create a password-protected area for files through the server. **NCDOI has implemented an industry approved solution that allows our users to sync and share files in a secure method**. A client portal feature will be set up to allow the TPA to submit their application file or renewal letter. See TPA V ShareFile Instructions on the NCDOI website for further information and instructions.

To get started, the attached ShareFile Contact Form must be completed and returned to Avonya Judd-Agbor at: <a href="mailto:Avonya.juddAgbor@ncdoi.gov">Avonya.juddAgbor@ncdoi.gov</a>. Her telephone number is 919-807-6057. This **Citrix ShareFile Contact Form** can also be downloaded from our website here: <a href="http://www.ncdoi.com/LH/Licensing">http://www.ncdoi.com/LH/Licensing</a>, Renewals and Other - TPA.aspx#CITRIX

Once we set up the ShareFile Account we will notify you and then you can follow the **Citrix ShareFile – How to Guide** found under CITRIX ShareFile Instruction tab at the above link

Once your ShareFile Account has been set up the following Initial or License Renewal Application Forms and Supporting Documentation can be uploaded

#### INITIAL AND RENEWAL LICENSE APPLICATION FORMS

- TPA License Transmittal (TPATRN 2017.08) http://www.ncdoi.com/lh/Documents/Licensing/TPA/TPALicenseTransm.pdf
- TPA License Application (TPAAPP.2017.08)
   <a href="http://www.ncdoi.com/lh/Documents/Licensing/TPA/TPALicenseApplication.pdf">http://www.ncdoi.com/lh/Documents/Licensing/TPA/TPALicenseApplication.pdf</a>
- TPA License Questionnaire (TPAQSN 2017.08) http://www.ncdoi.com/lh/Documents/Licensing/TPA/TPALicenseQuestionnaire.pdf
- TPA Biographical Affidavit (TPABIO.11.23.05 or the NAIC BIO Form) http://www.ncdoi.com/lh/Documents/Licensing/TPA/TPABiographicalaffidavit.pdf
- TPA Internal Control (TPAICT.09.08.00) http://www.ncdoi.com/lh/Documents/Licensing/TPA/TPAInternalControl.pdf

- TPA Power of Attorney for Company (TPAPOA.09.08.00) or <a href="http://www.ncdoi.com/lh/Documents/Licensing/TPA/TPAPowerofAttorneyforCompany.pdf">http://www.ncdoi.com/lh/Documents/Licensing/TPA/TPAPowerofAttorneyforCompany.pdf</a>
- TPA Power of Attorney for Partnership (TPAPPA.09.08.00)

http://www.ncdoi.com/lh/Documents/Licensing/TPA/TPAPowerofAttorneyforPartnership.pdf

## In order to facilitate our review, the Forms and the Supporting Documentation should be uploaded into CITRIX ShareFile in the following format:

- Correspondence Cover Letter, Third Party Filer Authorization, # 15 on the Transmittal Form.
- ❖ Application Forms Transmittal, Application, Questionnaire, and the following supporting documentation from the Transmittal, items # 4, 8, 9, 10, 13, 14.
- ❖ Organizational Documents, from the Transmittal Form items # 3, 5, 11
- ❖ Financial Statements and Internal Controls, from the Transmittal Form items # 6 &7.
- ❖ Biographical Affidavits and List of Officers & Directors
- Any Consent Orders, Violations, or Judgements

### **General Information – TPA Applications**

- Refer to the Transmittal document for a list of all material which is required to be submitted with an initial or renewal license application.
- Include a self-addressed and stamped envelope in each communication for return of the approval letter and the TPA License with the Seal.
- Pursuant to NCGS 58-56-51(g), "a TPA shall notify the Commissioner of any material change in its ownership control, or other face or circumstance affecting its qualification for a license in this State, within 10 business days after the change." This can be done by electronically to <a href="mailto:LHInbox@ncdoi.gov">LHInbox@ncdoi.gov</a>.
- ➤ The \$300 Filing Fee Check should be mailed to our office at one of the following addresses below:

Life and Health Division/
Third Party Administrator Unit
North Carolina Department of Insurance

for Overnight Delivery Only

1201 Mail Service Center Raleigh, NC 27699-1201 325 N. Salisbury St. Raleigh, NC 27603