

Third Party Administrator (TPA) – Financial Statement

Every TPA must file a financial statement with the initial request for a Certificate of Authority in Michigan. Thereafter, a financial statement must be submitted annually with the invoice received from DIFS and a \$25.00 filing fee. The information provided on the financial statements should be for the TPA, not for the TPA's parent company. In lieu of Pages 2 and 3 of this form, the TPA may submit the most recent independent, audited financial statements along with an opinion prepared by a certified public accountant. If the audited financial statements are for a parent company, a spreadsheet must be included that breaks down the balance sheet and income statement line items by subsidiaries.

For the Fiscal Year	
Beginning	_____
Ending	_____
Statement and fee are due annually by July 1st for all TPAs with a Michigan Certificate of Authority.	

Name of Third Party Administrator (TPA)		TPA Tax ID Number (FEIN)					
Contact person name and title (for inquiries regarding this financial statement)							
Contact person email address				Contact person phone number		Ext number	
Does the TPA own facilities? If no, attach the agreement that allows the TPA to use the facilities and provide a brief description.							
Is the TPA the direct employer of all employees, including claims processing? If no, attach the agreement that allows the TPA to utilize the employees' services and briefly describe.							
Does the TPA directly provide claims adjudication?							

All information above is required. Please do not leave any spaces blank.

If this is an annual filing, please be sure to complete and attach form [FIS 0865 Third Party Administrator \(TPA\) Jurat Page for Annual Filing](#). Incomplete filings will be returned without review and could subject the TPA to penalties for late filing.

Verification

I swear under penalty of perjury that the information above and attached is true, accurate and complete.

Signer's name and title (type or print)

--

Signature (digital/original signature only)

Date signed

--	--

PA 218 of 1984 as amended requires submission and verification by Third Party Administrators who have or are requesting a Michigan Certificate of Authority. Failure to properly complete and file or amend this form may result in denial or revocation of Certificate of Authority or other compliance action.

Annual Statement Renewal Filing Checklist

- [FIS 0865 Third Party Administrator Jurat Page for Annual Filing](#) form
- Pages 2 and 3 of this form **OR** audited financial statements with opinion; fiscal period end date must be within the last 12 months
- Payment of \$25.00 annual filing fee (required electronically: <https://www.michigan.gov/difs/difs-epayment>)
- A representative of the TPA signed and dated this form

Mail application for Third Party Administrator Certificate of Authority to:

DIFS Insurance Licensing
PO Box 30165
Lansing, MI 48909-7665

For annual filing, email to DIFS-LicensingORE@michigan.gov or mail to:

DIFS Insurance Licensing
PO Box 30220
Lansing, MI 48909-7720

Validation Code
87-10-70



Michigan Department of Insurance and Financial Services

DIFS is an equal opportunity employer/program.
Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.
Visit DIFS online at: www.michigan.gov/difs Phone DIFS toll-free at: 877-999-6442

Third Party Administrator (TPA) – Financial Statement

As Of: _____

Independent audited financial statements may be submitted in lieu of pages 2 and 3. Page 1 must always be filed. See detailed instructions on Page 1.

Complete entire statement. Use blank lines to itemize and describe other items. Attach additional sheets if necessary. Place TPA name, Tax ID Number (FEIN) and fiscal year end in the upper right corner of all attachments.

Name of Third Party Administrator (TPA)	TPA Tax ID Number (FEIN)

ASSETS	LIABILITIES AND STOCKHOLDERS' EQUITY
--------	--------------------------------------

CURRENT ASSETS

- 1. Cash _____
- 2. Accounts receivable _____
- 3. Investment income _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____
- 9. **Total current assets**
(add lines 1 through 8) _____

LIABILITIES

- 20. Accounts payable _____
- 21. Federal taxes _____
- 22. State & City taxes _____
- 23. Notes payable _____
- 24. _____
- 25. _____
- 26. _____
- 27. _____
- 28. **Total liabilities**
(add lines 20 through 27) _____

NON-CURRENT ASSETS

- 10. Furniture & fixtures _____
- 11. Equipment & supplies _____
- 12. Building/facilities _____
- 13. Goodwill _____
- 14. Other Intangible assets _____
- 15. _____
- 16. _____
- 17. _____
- 18. **Total non-current assets**
(add lines 10 through 17) _____
- 19. **TOTAL ASSETS**
(add lines 9 and 18) _____

STOCKHOLDERS' EQUITY

- 29. Common stock _____
- 30. Preferred stock _____
- 31. Additional paid-in capital _____
- 32. _____
- 33. _____
- 34. _____
- 35. _____
- 36. Retained earnings _____
- 37. **Total stockholders' equity**
(add lines 29 through 36) _____
- 38. **TOTAL LIABILITIES AND STOCKHOLDERS' EQUITY**
(add lines 28 and 37) _____

