**SAMPLE TPA AGREEMENT/LANGUAGE**

May 24, 2022

Name of TPA (Arial)

Name (Arial)

Address Line 1(Arial)

Address Line 2 (Arial)

RE: Name/Title

Dear [insert name],

Effective July 1, 2022, as the third party administrator of [insert name] Company’s group health plan, [insert TPA name] (“TPA”) hereby agrees to post and make publicly available on its website machine readable files (MRFs) that comply with the in-network and out-of-network disclosures required of group health plans pursuant to the Transparency in Coverage regulations and Consolidated Appropriations Act, in the form and following the timing required by the relevant federal authorities. TPA also agrees to provide a link to such information to [insert name] Company for posting on the Company website. This agreement shall be incorporated into the parties’ administration agreement.

TPA acknowledges its responsibility to make the required disclosures by signing below.

Please acknowledge your acceptance of the responsibility to make the required disclosures by signing below.

[Insert TPA name here]

|  |  |
| --- | --- |
|  | May 24, 2022 |
| By:  | Date  |