



# Application for Utilization Review Agent

Check appropriate box for application requested.

- Initial Application – Fee \$150.00
  - Renewal Application – Fee \$100.00
- UR License Number \_\_\_\_\_

Indiana Department of Insurance

For Dept. use only:

Date Fee  
Processed \_\_\_\_\_

Date Registration  
Processed \_\_\_\_\_

## INSTRUCTIONS:

1. All Utilization Review Agent Licenses must be renewed annually. Initial applications and renewal registration can be completed electronically at [www.sircon.com/Indiana](http://www.sircon.com/Indiana).
2. Utilization Review Agents are required to provide documentation that they are in compliance with each of the statutory and regulatory requirements necessary to be licensed as a Utilization Review Agent. Any material changes in the information on the application or renewal form previously submitted should be reported not later than the thirtieth (30<sup>th</sup>) day after the date on which the changes take effect.
3. **Initial Application:** Submit application, utilization review checklist with documentation, and initial fee.
4. **Renewal Application:** Submit application, and renewal fee. Checklist with documentation is only required for changes since the last renewal.
5. Any change resulting in a **new tax EIN#** is considered an initial application.

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## Corporate Demographics

\_\_\_\_\_  
Name of Utilization Review Entity

\_\_\_\_\_  
D/B/A Name

\_\_\_\_\_  
FIN/EIN Number

\_\_\_\_\_  
Address (If P.O. Box, also include street address)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Toll Free Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
E-mail Address

## Certification

This company, through its duly authorized officer, hereby applies for the registration authorizing it to operate as a utilization review agent in the State of Indiana, and does hereby swear that all responses, information, exhibits and documentary evidence submitted in support of this application are true and correct.

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**Renewal Application Certification:** (check one)

- I certify that there have been no changes to any application information and documentation submitted during the last year; or
- I certify that there have been changes to the previously submitted application information and documentation and have attached the revised documentation.
  
- New Application Certification**

Certified by:

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Signature of Applicant

Title

Date

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Printed Name