844-561-1328 855-717-6571
PO Box 6161 | Fargo, ND 58108-6161
aptia365employer@serviceaccount.com

Aptia365

Employer/Carrier Authorization Form

Company Name

Tax ID Number

Carrier Name

ATTN: Carrier Eligibility Department — Complete requested information

As the new COBRA administrator, Aptia will be sending eligibility updates regarding the coverage of COBRA members. Please provide the following information:

Plan Information:

Aptia requires this information to properly administer eligibility for COBRA members.

When would coverage for a newly added dependent begin?

☐ The day of the event ☐ On the first day of the following month ☐ Other, please specify:

When would coverage end if a dependent is removed for death, divorce or loss of dependent status?

☐ The day of the event ☐ Last day of the month ☐ Other, please specify:

Eligibility Contact Information:

At this time, Aptia will send manual COBRA eligibility updates via secure email to the eligibility contact provided below.

Eligibility Contact Name (or Department Name):	
Eligibility Phone Number:	
Eligibility Email Address:	
Customer Service Phone Number:	

Do you require monthly COBRA paid-through reports sent to you by Aptia? ☐ Yes (eligibility email address required) ☐ No

If you are interested in an electronic file feed for communicating COBRA eligibility updates, please check the electronic file box, and complete the Technical File Contact information below. Aptia will be in touch when they are ready to start the process. Once the electronic file has been established the manual eligibility updates provided to the eligibility contact above will cease. ☐ Electronic File

Technical File Contact Name (or Department Name):	
Technical File Contact Phone Number:	
Technical File Email Address:	

Group Structure Information:

Aptia requires a copy of our company's group structure outlining the policy numbers and COBRA codes.

Include a copy of the group structure as a supplement to this letter or list the information below.

☐ Group structure is attached. ☐ Codes are listed below.

Plan Name	Policy Number	COBRA Sub Code

Note: Aptia may be contacting the eligibility contact during the set-up process of our COBRA account to ensure all information listed above is accurate or if Aptia has any questions. Carrier Contact(s) will be listed in our system as Authorized Contacts for HIPAA regulation requirements.