**Section 2051.240 Registration, Renewals and Appeals**

a) No person, partnership or corporation shall act as an administrator until that person, partnership or corporation has registered with the Director as required by this Section. In addition, all administrators shall annually renew their registration with the Director as required by this Section.

b) Upon the filing of an application to register as a preferred provider program administrator and the payment of the registration fee required by Section 2051.250, the Director shall register the applicant if the Director finds that the applicant:

1) Has provided a detailed plan of operation;

2) Is competent and trustworthy and intends to act in good faith in the capacity authorized by the license;

3) Has a good business reputation and has had experience, training or education so as to be qualified in the business for which the license is applied for; and

4) Has incorporated under the laws of this State or, if a foreign corporation or limited liability corporation, is authorized to transact business in this State.

c) A registered administrator may continue to operate if a completed renewal application and the fee required by Section 2051.250 have been filed prior to the renewal date, unless the renewal is denied by the Director.

d) If a completed renewal application and appropriate fee are not received prior to the renewal date, the registration will automatically expire. An administrator whose registration has expired may not operate in this State until the administrator reapplies and pays the initial registration fee established by Section 2051.250 and the Director registers the administrator as provided by Sections 2051.240 and 2051.250.

e) The Director may suspend, revoke or refuse to issue or renew an administrator's registration or may levy a civil penalty, or take any combination of actions, if the applicant:

1) Provides unjust, unfair, inequitable, ambiguous, incorrect, misleading, incomplete, inconsistent, deceptive or materially untrue information, or if the program is administered in a way that is contrary to law or to the public policy of this State;

2) Has violated any insurance laws or any rule, subpoena or Order of the Director or of another state's insurance commissioner;

3) Is registered or attempts to register through misrepresentation or fraud;

4) Improperly withholds, misappropriates or converts any moneys or properties received in the course of doing business;

5) Intentionally misrepresents the terms of an actual or proposed DHCSP;

6) Has been convicted of a felony;

7) Has admitted or been found to have committed any unfair trade practice or fraud;

8) Uses fraudulent, coercive or dishonest practices, or demonstrates incompetence, untrustworthiness or financial irresponsibility in the conduct of business in this State or elsewhere;

9) Has an administrator's registration, or its equivalent, denied, suspended or revoked in any other state, province, district or territory;

10) Knowingly contracts with an administrator who is not registered.

f) If an application for registration or renewal is denied under this Section or if the registration is suspended or revoked, the applicant may appeal that action by requesting a hearing under the terms of Article 10 of the Illinois Administrative Procedure Act [5 ILCS 100/Art. 10] and 50 Ill. Adm. Code 2402. A petition for hearing must be postmarked no later than 30 days after the date of initial denial. A hearing shall be scheduled within 45 days after the petition is filed with the Director. An Order shall be issued by the Director within 60 days after the close of the hearing.

g) Each administrator must keep current the information required to be disclosed in its registration statements by reporting any change or alteration in existing materials that would have an effect on the operation of the administrator, the availability and accessibility of health care, or any parties directly or indirectly contracted with the administrator to the Director within 30 days after the end of the month of each change or addition. All information filed with the Director pursuant to this Part regarding the methods and/or amounts of reimbursement between providers and the administrator under a preferred provider program, or between administrators, is deemed to be confidential.

h) For the purposes of a WC PPP, the Director of the Department of Insurance shall make each administrator's filing available to the public upon request. The Director may not publicly disclose any information submitted pursuant to Section 8.1a that is determined by the Director to be confidential, proprietary or trade secret information pursuant to State and federal law.

(Source: Amended at 37 Ill. Reg. 2895, effective March 4, 2013)