

PAYFLEXSM

AUTOMATIC CONTRIBUTION PAYMENT ELECTRONIC FUNDS TRANSFER (EFT)

I authorize PayFlex Systems USA, Inc. ("PayFlex") to initiate debit and/or credit entries to the account designated below for payment of my monthly insurance benefit contributions. This agreement will remain in full effect until PayFlex receives written instruction from me to rescind this authorization.

PART 1: PARTICIPANT INFORMATION

Name: _____ Participant ID: _____

Signature: _____ Date: _____

IMPORTANT: You will receive a confirmation letter, with the effective date denoted, once your EFT is set up by PayFlex. Please continue to mail payments until you have received the confirmation.

PART 2: FINANCIAL INSTITUTION

Name of Financial Institution: _____

Account Type: Checking Savings Other

ABA Routing Number:

Account Number:

The bank routing number can be found in the lower left hand corner of your check and is usually the first 9 digit number. Your bank account number is usually found next to the routing number, as shown on the illustration below.



Attach a copy of a voided check to this form and mail to:

PayFlex Systems USA, Inc.
BENEFITS BILLING DEPARTMENT
P.O. BOX 953374
ST. LOUIS, MO 63195-3374

PayFlex Systems USA, Inc. for
BMO FINANCIAL CORP
BENEFITS BILLING DEPARTMENT
P.O. BOX 953374
ST. LOUIS, MO 63195-3374
(888) 678-7835

IMPORTANT INFORMATION ABOUT YOUR PREMIUMS

PayFlex will be your premium billing administrator beginning 11/01/2019. Your payment coupons for the remainder of the current plan year are enclosed. The coupons reflect your monthly premiums due and should be returned with your payment.

IMPORTANT PAYMENT DEADLINES

Your employer can provide you access to retiree or leave benefits only if you pay on time. You can pay using automatic bank draft, check, or money order. If you mail your payment, **each payment must be postmarked on or before the “Last Day to Postmark” date on your remittance stub. If your coverage is cancelled, it is cancelled effective the last date for which payment was made.**

For example, your November payment is due 11/01/2019. Your coverage is terminated if payment is not postmarked on or before 11/30/2019. If you participate in automatic bank draft, your payment will be current because your account is charged on or around the 8th of the month in which it is due – before the grace period expires.

When Your Premium Payment Is Due

Your monthly payment is due on the first day of each coverage period and the grace period expires 30 days later. If you do not pay on or before the end of the grace period, your coverage ends the last date for which payment was made.

The envelope postmark date is considered the date paid. If the postmark date is after the last day of the grace period, your coverage is cancelled effective the last day of the month for which payment was made. *Remember to double-check the mail pick-up time if you drop your payment in a mailbox on the last day of the month.*

Regardless of how you make your premium payment, if there are insufficient funds in your bank account to cover the premium payment amount and you do not pay by the last day of the month in which payment is due, your coverage may be cancelled.

You are responsible for timely payment of your benefit premiums – even if you did not receive coupons, you lost a coupon, or you did not receive a notice that your premium is late.

How To Pay Your Premium

- 1. Automatic premium bank draft is the best way to pay! Avoid the worry that your benefits will be cancelled because your payment is late.**

Complete the enclosed Electronic Funds Transfer (EFT) form, attach a voided check, and mail it to us immediately. Your account will automatically be charged for the amount of your premium on or around the 8th of the month in which it is due. Always check to make sure the EFT form has been processed before you decide to stop mailing your payments. Be sure to call us if you are not sure when your automatic draft begins.

Please be advised by enrolling in EFT you will no longer receive payment coupons in the mail. **Your EFT deduction amount will change based on your benefit selections during annual enrollment.** Account information can be accessed online by visiting <http://www.payflex.com>.

The EFT will stop once your billing with PayFlex stops however be advised that any future billing with PayFlex will revert to the automatic premium bank draft you set up. If you no longer wish to continue with automatic premium bank draft, you can remove it by accessing your account on <http://www.payflex.com> or submitting your request in writing to PayFlex at the address above.

2. Online Account Access through the Website

PayFlex makes it easy to access your online account by going to <http://www.payflex.com>. Select the "Employee Account Login" link, located on the top of the screen. Click "REGISTER" to begin registering your account. Enter your Member ID. This number may be your Social Security number or another Employee ID number assigned by your former employer. Next, enter your Zip or Postal Code. Choose your preferred Username and Password as well as other security information. When all fields are complete, select "Confirm". If your employer allows "One Time" and/or "Recurring" online payments, you can choose to make either your initial payment only OR make your initial payment AND continue to make payments through electronic fund transfer (EFT) from your checking or savings account.

After registering, you will need to log out and login again to the website using the username and password you selected.

To make your initial payment only, select the "Make a Payment" link and then select "One Time Payment". Your payment will be electronically transferred from the account you designate.

If you wish to continue to make payments through electronic fund transfer (EFT) from your checking or savings account, select "Recurring Payment". You will receive a confirmation of your authorization to make monthly payments automatically. By enrolling in the automatic bank draft, you will no longer receive a statement or coupons in the mail. If you decide to enroll in "Recurring Payments" you can also make your initial payment at the same time by checking "*Yes! In addition to enrolling in recurring payments please initiate a payment for my current balance on the next business day.*" Account information can be accessed at any time online by going to <http://www.payflex.com>.

3. Pay by mail

Please remember your payment is due on the 1st day of each coverage period and your grace period expires 30 days later. Your payment must be postmarked no later than this date.

Make your check payable to PayFlex and mail it to:

PayFlex Systems USA, Inc.
BENEFITS BILLING DEPARTMENT
P.O. BOX 953374
ST. LOUIS, MO 63195-3374

Late Notices / Termination

As a courtesy, if we have not received your payment by approximately the 15th of the month due, we will send you a late notice to remind you your payment is due by the last day of the given grace period. **Do not rely on this notice to remember your payment must be postmarked on or before the last day of the grace period.** Even if you do not receive a notice, if you have not made your payment by the end of the grace period, your coverage may be cancelled. Mark your calendar or ask a friend or family member to help you remember to make your payment to avoid cancellation of your benefits.

If your payment is not made by the last day of the grace period, you will receive a notice of termination after your coverage is cancelled. We cannot extend your coverage or reinstate your coverage if your payment is late. If your payment is not made by the last day of the grace period, you will receive a notice of termination after your coverage is cancelled. We cannot extend your coverage or reinstate your coverage if your payment is late.

If you have any questions regarding your coverage continuation, please contact our Customer Service Department at (888) 678-7835, Monday through Friday, 8am to 7pm Central Time.