

**Automatic Bank Draft
Authorization Agreement**
Anthem Blue Cross and Blue Shield
P.O. Box 37730
Louisville, Kentucky 40233-7730



Please provide the following information.

Deduct premium on the following basis. (Funds will be transferred on or about the same day of the month as your assigned effective date.)		
<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Semi-Annually <input type="checkbox"/> Annually
Name of bank/financial institution		Account number
City	State	ZIP code
Member Name <i>(please print)</i>		
Member Identification No./Social Security No.		
Account holder's Name		
Account holder's Signature		Date
<i>(Do not write in shaded box)</i>		
Bank transit/ABA number:		

I hereby authorize Anthem Blue Cross and Blue Shield to initiate premium deductions from the account indicated above, and the designated financial institution named above to debit the same account. I understand that this authorization is in effect until I notify Anthem Blue Cross and Blue Shield and the financial institution in writing that I no longer desire this service, allowing Anthem Blue Cross and Blue Shield and the financial institution reasonable time to act upon my notification. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my account. I understand Anthem Blue Cross and Blue Shield and my financial institution have the right to discontinue the withdrawals if they wish to do so.

This authorization is non-negotiable and non-transferable. Return this authorization to Anthem Blue Cross and Blue Shield at the address given above.

Anthem Blue Cross and Blue Shield is the trade name of: In Indiana: Anthem Insurance Companies, Inc. In Kentucky: Anthem Health Plans of Kentucky, Inc. In Ohio: Community Insurance Company. In most of Missouri: RightCHOICE® Managed Care, Inc. (RIT), Healthy Alliance® Life Insurance Company (HALIC), and HMO Missouri, Inc. use to do business in most of Missouri. RIT and certain affiliates administer non-HMO benefits underwritten by HALIC and HMO benefits underwritten by HMO Missouri, Inc. RIT and certain affiliates only provide administrative services for self-funded plans and do not underwrite benefits. In Wisconsin: Blue Cross and Blue Shield of Wisconsin ("BCBSWi") underwrites or administers the PPO and indemnity policies; CompCare Health Services Insurance Corporation ("CompCare") underwrites or administers the HMO policies; and CompCare and BCBSWi collectively underwrite or administer the POS policies. Life and disability products are underwritten by Anthem Life Insurance Company. Independent licensees of the Blue Cross and Blue Shield Association. © Anthem is a registered trademark. The Blue Cross and Blue Shield names and symbols are registered marks of the Blue Cross and Blue Shield Association.

Automatic Bank Draft Payments

A real savings in time and money!

Why write and mail checks for your health coverage? Let your bank do the paperwork for you...automatically.

With your authorization, your bank or financial institution deducts (debits) the amount of the premium from your account and automatically transfers that premium to Anthem Blue Cross and Blue Shield as it comes due.

The amount of your premium payment will appear on your bank statement. And you can cancel this agreement at any time by notifying Anthem in writing, allowing Anthem Blue Cross and Blue Shield and the financial institution reasonable time to act upon your notification.

How does automatic bank draft payment benefit me?

- You save the cost of checks and postage.
- You waste no time writing checks and posting the letters.
- Your payment is received on time, even if you are ill or away from home.
- You receive a record of payment on your bank statement.
- You won't wait for a bill in the mail; won't worry that it's been lost or misplaced.
- There is no service charge or fee for this service.

Anthem will make all arrangements with your bank or financial institution for the automatic bank draft payment. **Please allow us six to eight weeks to process your authorization. To help ensure that we keep your healthcare coverage current, the first automatic bank draft may include multiple monthly premium amounts.**

To avoid a lapse in coverage, we ask that you notify Anthem at least two weeks in advance if you close this account. And please notify us of any address change.

How do I sign up?

It's easy. Just follow these simple steps:

- Complete and sign the bank draft authorization agreement on the reverse side.
- Attach either a blank voided check for checking account deduction or a blank deposit slip for savings account deduction.
- Return both copies of this authorization to the address on the front of this form.

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