PO Box 91110
Sioux Falls, SD 57109-1110
(605) 328-6868
(877) 305-5463

Payment Authorization (ACH)

for Marketplace members

Plan Type: ☐ Simplicity Individual Plan ☐ Sanford TRUE
Applicant Type: ☐ New Applicant ☐ Bank Account Change

	Form Completed By	Automatic Deduction from your bank account
Initial premium payment	10th of month prior to effective date	20th of month (or next business day) prior to effective date
Ongoing premium payment	10th of the month	20th of month (or next business day)

IMPORTANT: By completing this form you have elected to have your monthly premiums automatically deducted from your checking or savings account. A record of each automatic withdrawal will appear on your bank statement. Marketplace members are required to pay premium a month in advance. For example, your March premium would be drafted in February.

I authorize Sanford Health Plan to initiate electronic debit entries to the bank account indicated below. This authority is to remain in full force until I terminate this authorization in writing. I understand that if I want to cancel my automatic account withdrawal, I have to notify Sanford Health Plan in writing at least 20 days prior to the next scheduled withdrawal.

Policy Holder Name: ______________________________ SS#: ____________________

Health Plan ID card # *(if you are a current member)*: ______________________________

Bank name: ______________________________ Bank Phone: ____________________

Bank address: ____

Transit routing #: ____________________ Account #: ____________________ ☐ Checking ☐ Savings

Signature: ______________________________ Date: ____________________

NOTE: Include a voided check for checking accounts or a deposit slip for savings accounts with this authorization form. This will be used to verify transit routing number and account number information. Mail this form along with a voided check or deposit slip in the enclosed envelope. Please keep a copy for your records.

Mail to: Sanford Health Plan
PO Box 91110
Sioux Falls, SD 57109-1110

Or fax to: (605) 328-7197