



AUTHORIZATION AGREEMENT FOR AUTOMATIC MONTHLY PREMIUM PAYMENT



MN Public Employees Insurance Program

Send completed form to:

PEIP - Innovo Benefits Administration

7805 Telegraph Road, Suite 110; Bloomington, MN 55438

Phone: 800-829-5601 or 952-746-3106 Fax: 952-746-3108

Email: gail@innovomn.com

Print Insured's Name (as it appears on invoice)

Insured's Address

City

State

Zip

Telephone Number

Email Address (required)

A payment confirmation will be emailed each month.

Payment Information

Select either EFT from Bank Account or Monthly Card Payment below. Changes must be received seven (7) business days prior to the current ACH processing date. Please indicate the date you want this request to become effective: ____/____/____

New Authorization

Change

Stop

Payment Amount: _____ Payment Date (if other than the 25th): _____

Payments are due and will be scheduled for the 25th of the current month for the next month's premium unless an earlier date is requested. Indicate the date of each month you want the payment to be made if other than the 25th.

EFT from Bank Account (no fee):

Name(s) as listed on bank account

Checking

Savings

Bank ABA Routing Number (9 digits located in bottom left hand corner of check)

Bank Account Number

Monthly Card Payment:

Credit Card (VISA, MasterCard, American Express or Discover)

(2.49% of payment amount service fee)

VISA Signature Debit Card

(\$3.95 flat fee per payment)

Name on Card

Card Number

Expiration Date (MM / YY)

Card Security Code

Authorization Agreement for Automatic Payments

This authorizes the MN Public Employees Insurance Program (PEIP), to initiate Electronic Funds Transfers from the bank account or monthly charges to the credit or debit card above for premium payments due to PEIP. This authorization will remain in force until PEIP has received written notice of its change or termination in such time and manner to allow PEIP and your bank a reasonable opportunity to act on it.

Account Owner/Cardholder Signature

Date

The Minnesota Public Employees Insurance Program's (PEIP) online payment system allows us to now offer automatic monthly premium payment options. By completing and returning the [AUTHORIZATION AGREEMENT FOR AUTOMATIC MONTHLY PREMIUM PAYMENT](#), you're authorizing Minnesota Management & Budget (the State agency that runs (PEIP), to either deduct from your bank account or initiate a credit card or debit card transaction to pay your monthly PEIP premium. This notice tells you what happens once you complete and return the form.

What information do I need to put on the form?

The form asks for basic information about you and your bank or financial institution. **It may help to have a recent PEIP invoice and a blank check with you when you fill out the form.**

- Please print the Insured's Name and Address as it appears on the monthly PEIP invoice.
- You must provide a valid email address. An automatically generated email will be sent each month advising you of the amount and date of the next automatic payment. You must contact us as soon as possible if you do not want a pending payment to be processed. While we can't guarantee that any pending payment can be stopped, we'll do whatever we can to satisfy your request.
- Check and complete **EFT from Bank Account** information if you want your monthly premium to be automatically deducted from your checking or savings account.
- Indicate whether the withdrawals will be made from a checking account or a savings account.
- Bank Account Number is the checking or savings account number.
- The Bank ABA Routing Number is the nine-digit number printed on the lower left corner of your check.
- Please list the name(s) of the accountholder(s) as listed on the bank account.
- Check and complete **Monthly Card Payment** information if you want your monthly premium to be automatically applied to your credit card or signature debit card. **A service fee of 2.49% of the amount of the payment will be charged for credit card payments. A flat service fee of \$3.95 per payment will be applied to debit card payments.**

Where do I send the completed form?

PEIP - Innovo Benefits Administration
7805 Telegraph Road, Suite 110
Bloomington, MN 55438

What happens after I return this form?

We'll process your form once we get it. If we can't process your request, we'll contact you as soon as possible to correct any issues. Once your form is successfully processed, we'll send an email telling you so.

How do automatic bank deductions work?

We'll deduct your premiums from your bank account, usually on the 25th of each month. It will appear on your bank statement as a "SMNPEIP" Automated Clearing House (ACH) transaction.

We'll only try to deduct your premiums once each month. If your bank rejects or returns your premiums deduction, we'll send you a letter with instructions on other ways to pay your premiums.

Do I need to do anything when my premium rate changes?

Along with your renewal notice, we will send you another AUTHORIZATION AGREEMENT FOR AUTOMATIC MONTHLY PREMIUM PAYMENT. If you wish to continue to have your new monthly premium automatically paid from your bank account or applied to your card account, you'll need to complete, sign and return the new form, authorizing the new amount.

What if I want to change bank accounts or stop automatic payments?

Contact us to request a new AUTHORIZATION AGREEMENT FOR AUTOMATIC MONTHLY PREMIUM PAYMENT. The form is also available to print on our website.