

Blue Cross and Blue Shield of Alabama is pleased to offer the added convenience and security of direct deposit at NO cost to you. To take advantage of Blue Cross' Direct Deposit Service:

- Complete the authorization form in full
- Provide a cancelled or voided check
- Return it to Blue Cross and Blue Shield of Alabama or enter online at **AlabamaBlue.com**. For online access, log-in to "myBlueCross". If you are not already registered, please click "**Need to Register Your Account?**" and follow the instructions.

ACTION:	<input type="checkbox"/> ADD <input type="checkbox"/> CANCEL <input type="checkbox"/> CHANGE
SUBSCRIBER NAME:	
CONTRACT NUMBER(S):	
DAY TIME PHONE NUMBER:	

I hereby authorize Blue Cross and Blue Shield of Alabama to initiate credit entries (deposits) to my account at the depository bank named below (hereinafter called Depository Bank), and credit the same to such an account.

☐ **Checking Account** ☐ **Savings Account**

NAME ON ACCOUNT:	
DEPOSITORY (BANK) NAME:	
ABA ROUTING NUMBER:	
ACCOUNT NUMBER:	

Note: Initial updates or charges will require a one week set-up period with the bank.

You will continue to receive a Statement of Account and/or Claims Summary from Blue Cross indicating the amount deposited in your specified account. Your Reimbursement History is also available on myBlueCross.

This authority is to remain in full force and effect until Blue Cross and Blue Shield of Alabama has received written notification from me of its termination in such time and in such manner as to afford Blue Cross and Blue Shield of Alabama and DEPOSITORY (Bank) a reasonable opportunity to act on said notification of termination. Blue Cross and Blue Shield of Alabama reserves the right to return or adjust any errors in accordance with applicable National Automated Clearinghouse Association Operating Rules.

Signature

Date

Please return this form and voided check to:

Mail	Fax	Email
Blue Cross and Blue Shield of Alabama ATTN: Treasury Operations P.O. Box 362165 Birmingham, AL 35236-9832	You may fax this form to: ATTN: Treasury Operations 205-220-2795	You may email this form to: SubscriberEFT@bcbsal.org