



Dear Group:

EMI Health is pleased to offer AutoPay for your premium payment and/or claims payment. This online payment will automatically deduct the due amount from your checking account. In addition to saving you on the cost of envelopes and postage, AutoPay will save you the trouble of writing checks. You no longer have to worry about whether your payment arrived on time.

To sign up, log into our group portal at <https://groups.emihealth.com/security/login> and create an autopay in the profile tab or make a payment in the portal and checkmark autopay. You can also complete and sign the form below and return it to emiabilling@emihealth.com.

If you have any questions, please contact our billing department at (801) 262-7476 or toll free at (800) 662-5850.

Sincerely,

BILLING DEPARTMENT / LIFE INSURANCE

I hereby authorize EMI Health to withdraw my total monthly premium payment and/or claims payment from my checking account at my depository institution on the 1st day of each month, or the first business day thereafter. This authority is to remain in effect until EMI Health has received written notification from me thirty days prior to the next scheduled electronic premium payment, or until I receive written notification of termination from EMI Health. Failed withdrawals may be subject to an additional administrative fee.

Name of Financial Institution _____

Financial Institution Routing Number _____

Checking Account Number _____

Group's Name (printed) _____

Group Number _____

Applicant's Signature & Title _____