

# BlueCross BlueShield of Tennessee, Inc. (BCBST) Electronic Funds Transfer (EFT) Authorization

## Reason for Submission:

- New EFT Authorization                       Revision to Current Authorization  
(e.g., account or bank changed)

Effective as of \_\_\_\_\_, BCBST and \_\_\_\_\_ ("Vendor") agree as follows with regard to payment of the obligations incurred by BCBST for pursuant to that certain contract between BCBST and Vendor dated \_\_\_\_\_:

1. Vendor authorizes BCBST to initiate credit entries periodically ("ACH Credits") to its deposit account (identified below as the "Account") for the purposes set forth in this EFT Authorization and to initiate adjustments for any credit entries made in error to the Account.
2. Vendor authorizes the financial institution/bank named below to credit and/or debit the same to such Account.
3. The ACH Credit amount will be the total amount from an invoice sent by Vendor. Any issues, objections or discrepancies regarding the amounts invoiced will be reported promptly to Vendor. An ACH Credit to the Account in the amount of the invoice total will be initiated to clear on the later of (i) the due date specified on the invoice or (ii) within twenty-five (25) days following the date the invoice is received by BCBST.
4. Vendor and BCBST shall be bound by the National Automated Clearing House Association rules relating to corporate trade payment entries (the "Rules") in the administration of these ACH Credits.
5. This authorization shall be valid until either party, upon 60 days prior written notice, terminates it.
6. This authorization replaces and supersedes any prior authorization provided by Vendor to BCBST related to payments under the Vendor's contract with BCBST.
7. BCBST will continue to send the direct ACH Credit to the financial institution/bank indicated below until notified by Vendor that it wishes to change the financial institution/bank receiving the ACH Credit. If Vendor's financial institution/bank or account information changes, Vendor must submit an updated EFT Authorization at least 30 days prior to the date Vendor wishes the change to take effect. Depending on when this EFT Authorization is received by BCBST, initiation of ACH Credits may not take effect until the second month after the request has been submitted.
8. A photocopied, scanned or imaged version of this EFT Authorization will have the same force and effect as the original.

## For ACH Credit:

Account Name (as it appears on bank statement): \_\_\_\_\_

Bank Name: \_\_\_\_\_

ABA (bank routing) #: \_\_\_\_\_

Account #: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Account Type:     Personal        or         Business  
                          Checking        or         Savings

Confirmation of payment e-mail: \_\_\_\_\_

Vendor: \_\_\_\_\_

Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Please return to BCBST  
via fax                      (423) 535-3183  
via e-mail                ProcurementSupplierDiversitySelfCertMassMailing\_GM@bcbst.com

