



### Direct Deposit Request

This form is for Elderly Waiver care providers to complete for payments to be deposited directly into their banking account via ACH.

**Instructions**

To enroll in this service, please provide ONE of the following:

- \*Provide a voided check (not a deposit slip) with ABA round# and Account#
- \*Provide a letter from your bank stating your bank account information and signed by an authorized individual
- \*Submit a letter with your bank account information attesting the banking information is correct on company letterhead and signed by an authorized individual

This document is an Adobe fill in PDF that can be completed using Adobe Reader. You can complete the form and save it to your computer, then send via email attachment to [EWProviders@bluecrossmn.com](mailto:EWProviders@bluecrossmn.com) You can also type in the document and print it, then fax to us at 218-740-4616.

**Business Information as Registered with Bank**

Business Name on the Account \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Email Address \_\_\_\_\_

Federal Tax ID or Social Security # Associated with Bank Account \_\_\_\_\_

NPI(s)/UMPI(s) Registered for Claims Submission \_\_\_\_\_

**Direct Deposit Information**

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

Location \_\_\_\_\_

Routing # \_\_\_\_\_  
*(Federal Reserve Bank # -9 Digit Number in Lower Left Corner of Check)*

Account \_\_\_\_\_      Checking      Savings

Bridgeview Company is authorized to make payment via Automated Clearing House (ACH) transfers directly to the account and bank specified above. This authority is to remain in full force until the 30th day after Bridgeview Company is notified by us that this authority is terminated.

\_\_\_\_\_  
Signature of Authorized Person on Account  
*If you choose to email the completed copy of this form to us, your email with serve as the signed authorization.*

\_\_\_\_\_  
Printed Name of Authorized Person on Account

Date Signed \_\_\_\_\_

If you have any questions or concerns on the banking information, please email [vendorinfo@bluecrossmn.com](mailto:vendorinfo@bluecrossmn.com)