

If you wish to have multiple SelectAccount locations, please complete this form and include it with your Plan Design Guide. (Multiple SelectAccount locations **only** apply to claims reimbursements, not participant fees. Billing for participant fees will be displayed by location, but mailed only to one billing address and must be paid by check.)

Group Location Name _____
 Address _____
 Contact (if different from main contact) _____
 Phone Number () _____ Fax Number () _____
 Email Address _____

Will ACH information for this location differ from that of the main group? No Yes *If yes, please complete the ACH Addendum (F8945).*

For SelectAccount use for HRA's only:

<u>Grp #/CCS/BlueLink</u>	<u>Subgroup #(s)/CCS/BlueLink</u>	<u>SA Location Name</u>	<u>SA Location Code</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(If you need to list more groups, please attach a spreadsheet with the same columns and headers.)

Group Location Name _____
 Address _____
 Contact (if different from main contact) _____
 Phone Number () _____ Fax Number () _____
 Email Address _____

Will ACH information for this location differ from that of the main group? No Yes *If yes, please complete the ACH Addendum (F8945).*

For SelectAccount use for HRA's only:

<u>Grp #/CCS/BlueLink</u>	<u>Subgroup #(s)/CCS/BlueLink</u>	<u>SA Location Name</u>	<u>SA Location Code</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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Will ACH information for this location differ from that of the main group? No Yes *If yes, please complete the ACH Addendum (F8945).*

For SelectAccount use for HRA's only:

<u>Grp #/CCS/BlueLink</u>	<u>Subgroup #(s)/CCS/BlueLink</u>	<u>SA Location Name</u>	<u>SA Location Code</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(If you need to list more groups, please attach a spreadsheet with the same columns and headers.)