



## Employer Payroll Deduction Authorization

The person submitting this form wishes to have deductions made from their payroll distribution and sent to Managed Health Services (MHS) for Healthy Indiana Plan (HIP) POWER account contribution (PAC) payments. The employee should complete the "Employee Information" below, and a copy of the completed form should be faxed or mailed to MHS at the address on the bottom of this form. Payroll deductions associated with this employee's request should also be mailed to the address below. Please contact MHS Member Services at 1-877-647-4848 with questions.

### Employee Information

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

HIP ID #: \_\_\_\_\_

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

Name of Employer: \_\_\_\_\_

Begin date (Must be the first of the month): \_\_\_\_\_

Amount to Be Withheld Each Pay Period: \$ \_\_\_\_\_

### Please list how you are paid:

Weekly       Every two weeks       Monthly       Other (please list): \_\_\_\_\_

### Authorization

I hereby authorize \_\_\_\_\_ to make deductions from any compensation or monies due to me in the amount listed above. The monies deducted will be applied to contributions required to be made to MHS, Incorporated for participation in HIP. The deductions will be taken through the current calendar year, or until I no longer wish to participate or until I terminate my employment.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By signing this form, I attest that I have read and understand the above authorization.

### Employer Information

Payroll Address: \_\_\_\_\_

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

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Employer agrees to this optional program to allow employee deductions and forwarding to MHS?  Yes  No

### Please fax or mail this form to:

Managed Health Services, Premium Payments  
1099 N. Meridian Street, Suite 400  
Indianapolis, Indiana 46204.  
FAX: 1-866-855-9947

1099 N. Meridian Street, Suite 400 • Indianapolis, IN 46204 • 1-877-647-4848 • mhsindiana.com  
Members with speech or hearing disabilities call 1-800-743-3333 for TTY/TDD.

*MHS is a health insurance provider that has been proudly serving Indiana residents for nearly two decades through Hoosier Healthwise and the Healthy Indiana Plan. MHS also offers a qualified health plan through the Health Insurance Marketplace called Ambetter from MHS. MHS is your choice for affordable health insurance. Learn more at mhsindiana.com.*