

## WA HCA SEBB List Bill Process and Guidelines

**Summary:** This document contains the guidelines and draft process for a WA HCA SEBB locations to convert from Direct Bill to a List Bill process with MetLife. All Implementation steps and guidelines will be thoroughly reviewed with the participating SEBB locations.

## **Guidelines for SEBB Locations Agency:**

- SEBB Location Agency must identify a point of contact to work with the MetLife during the implementation process
- SEBB Location MUST use the standard MetLife list bill template, which will not allow negative adjustments and/or custom formatting and will be received and remitted via fax
- SEBB Location MUST agree to bill employees on a monthly cycle only (semi-monthly will not be available under this option)
- SEBB Location MUST be sure the remittance check matches the exact amount on the list bill being submitted for processing in order for a smooth billing cycle
- Remittance can be done via physical check or wire transfer: SEBB Location can only send ONE (1) wire or one check for the entire remittance amount and back up must be provided for both remittance options

Physical Check and List Bill will be sent to the following address MetLife P.O. Box 783895 Philadelphia, PA 19178-3895

Wire Bill Information – MetLife CBS Group Payroll Deduction WIRE ADDRESS

JP MORGAN CHASE Bank 1211 Avenue of the Americas New York, NY 10036

Routing number/ABA code: 021-000-021 Account Number: 002-2-430805 ACH Wire Instructions: Please use CCD format Please include the Customer name and group number on the wire. - SEBB Location will review and acknowledge written agreement outlining all the guidelines outlined above prior to start of testing

Please acknowledge that SEBB Location is in agreement with all that is outlined in this document via formal signature or email acceptance.

SEBB Location Signature & Date

School District Name

Primary Contact Name

Primary Contact Phone Number

**Primary Contact Email Address**