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You authorize The Strother Group, Inc., d/b/a Eagle Care Health Solutions, or its approved affiliate/marketing partner(s) to charge the debit card, credit card, or ACH bank account as indicated in this authorization on behalf of the Insurance Companies and benefit providers, and their respective plans which you have selected through this enrollment website. Furthermore, you acknowledge and agree that future payments may be charged to the debit card, credit card, or ACH bank account you have provided on a recurring monthly basis with your full authorization for the amount associated with the products and services selected above. Recurring monthly payments are billed in advance of the next benefit period, typically between the 15th - 20th of each month. If the recurring payment date falls on a weekend or holiday, you understand that the payment may be executed on the prior or the next business day. You understand that this authorization will remain in effect until you cancel it in writing via email or mailed letter. You agree to make any account changes with your secure online portal or notify The Strother Group, Inc., d/b/a Eagle Care Health Solutions, in writing of any changes in your account information. The Strother Group, Inc., d/b/a Eagle Care Health Solutions, applies a 3.5% administrative processing fee to all debit card, credit card, or ACH bank account transactions. This recurring monthly fee is included in the monthly benefit fee and is not refundable.

You certify that you are an authorized user of this debit card, credit card, or bank account and that you will not dispute the scheduled payments with your Credit Card Company or bank, provided the transactions correspond to the terms indicated in this authorization form.