

Small Employer Group Setup Information

Directions: Complete this form for all small employer groups that are converting to an HSA plan with ACS/Mellon as their HSA custodian. Forward completed form to the SEH Account Implementation Team

TPA Name	Horizon Blue Cross Blue Shield of New Jersey
Employer Name	
Employer Address	
Employer City	
Employer State (2-letter abbreviation)	
Employer Zip Code	
Employer Phone	
Employer Website	
Employer Finance Contact Name	
Employer Finance Contact Phone	
Employer Finance Contact Email	
Tax ID #	
SIC code	
Legal Status	