



# CANCELLATION REQUEST FORM

This form must be fully completed, signed by the primary account contact, and received by NueSynergy a minimum of **60 days prior to your cancellation date or plan year end date**. Cancellations cannot be processed retroactively. **Once all fillable fields are completed, please email to your NueSynergy Account Manager.**

<b>Company Name</b>		<b>Today's Date</b>	
---------------------	--	---------------------	--

  

CAFETERIA	SERVICE END DATE	COBRA/BILLING	SERVICE END DATE	COMPLIANCE	SERVICE END DATE
<small>Select all that apply</small> <input type="checkbox"/> Health Savings (HSA) <input type="checkbox"/> Flexible Spending (FSA) <input type="checkbox"/> Dependent Care (DCA) <input type="checkbox"/> Health Reimbursement (HRA) <input type="checkbox"/> Parking/Transit <input type="checkbox"/> Adoption Assistance	<small>*This is the last date claims will be processed</small> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<small>Select all that apply</small> <input type="checkbox"/> COBRA <input type="checkbox"/> Combined Billing <input type="checkbox"/> Direct Billing <input type="checkbox"/> Retiree Billing	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<small>Select all that apply</small> <input type="checkbox"/> Sec. 125 "Cafeteria" Plan Doc <input type="checkbox"/> Premium Only "POP" Plan Doc <input type="checkbox"/> Section 105 Plan Doc. <input type="checkbox"/> Discrimination Testing	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>
<small>NueSynergy office use only:</small> <small>Plan Year End Date</small> <div style="border: 1px solid black; width: 100px; height: 15px;"></div> <small>Runout End Date</small> <div style="border: 1px solid black; width: 100px; height: 15px;"></div>		<small>NueSynergy office use only:</small> <small>Plan Year End Date</small> <div style="border: 1px solid black; width: 100px; height: 15px;"></div> <small>Runout End Date</small> <div style="border: 1px solid black; width: 100px; height: 15px;"></div>		<small>NueSynergy office use only:</small> <small>Plan Year End Date</small> <div style="border: 1px solid black; width: 100px; height: 15px;"></div> <small>Runout End Date</small> <div style="border: 1px solid black; width: 100px; height: 15px;"></div>	

**Please indicate the reason for canceling your plan (check all that apply):**

<input type="checkbox"/> Moving to a new administrator - Company: <div style="border: 1px solid black; width: 200px; height: 20px;"></div>	<input type="checkbox"/> No longer qualify for plan
<input type="checkbox"/> Moving to self-administering plans	<input type="checkbox"/> No longer in business
<input type="checkbox"/> Moving to consolidate services	<input type="checkbox"/> Lack of participation
<input type="checkbox"/> Moving to new broker/agent	<input type="checkbox"/> Price
<input type="checkbox"/> Other: (please explain) <div style="border: 1px solid black; width: 300px; height: 20px;"></div>	

**Please rate your overall satisfaction with NueSynergy:**

	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Customer Service					
Account Management					
Technology					
Price					
Other: (Please explain)					

We are always looking for ways to improve our services. If you were dissatisfied with any of our services, please help us out and leave a note below. We thank you in advance for your input!

**DISCLAIMERS / IMPORTANT INFORMATION:**

**It is the Employer's responsibility to notify participant's of this cancellation, plan changes and claim submission deadlines.**

<b>Cafeteria Plans</b> <small>HSA, FSA, LP, DCA, HRA, PKG, TRN</small>	<ul style="list-style-type: none"> <li>NueSynergy Debit Cards will be deactivated on the cancellation date.</li> <li>Administrative fees will continue to be billed through the end of service.</li> <li>Depending on your banking setup, we may require 60 days after the cancellation end date to reconcile banking balances.</li> </ul>
<b>COBRA Retiree Billing</b>	<ul style="list-style-type: none"> <li>Approximately 7-10 days after your service end date, two reports will be sent to the main contact listed at the bottom of this form. (Participant Report and Qualified Beneficiary Report)</li> </ul>
<b>Combined Billing Direct Billing</b>	<ul style="list-style-type: none"> <li>Payments to carriers are set up one month in advance, so a MINIMUM of 60 days notice is required to insure cancellation of ACH drafts.</li> <li>NueSynergy does not have access to alter benefit plans at the carrier level. It is the Agent's and/or Employer's responsibility to contact carriers and notifying them of this change.</li> </ul>
<b>Invoicing</b>	<ul style="list-style-type: none"> <li>CAFETERIA PLANS and COMPLIANCE - Billed in arrears. Following your last month of service, last invoice will be sent by the 10th.</li> <li>COBRA &amp; RETIREE BILLING - Billed quarterly. Last invoice will be sent at the start of the next quarter.</li> <li>COMBINED AND DIRECT BILLING - Billed in arrears. Following your last month of service, last invoice will be sent between the 1st-5th.</li> </ul>

Are you willing to be a NueSynergy 'termination' reference? ☐ Yes ☐ No

**Completed by (NAME)****Email**

**We appreciate the opportunity to serve as your benefit administrator. We hope you will consider us in the future, whether for administrative services or any of our other programs that are fine-tuned to fit your business needs.**

<small>NueSynergy office use only:</small>					
<small>Group ID</small> <div style="border: 1px solid black; width: 100px; height: 15px;"></div>	<small>Banking</small>	<small>GRP</small> <div style="border: 1px solid black; width: 50px; height: 15px;"></div>	<small>NS</small>	<small>Date Received</small> <div style="border: 1px solid black; width: 100px; height: 15px;"></div>	<small>NS Employee</small> <div style="border: 1px solid black; width: 100px; height: 15px;"></div>