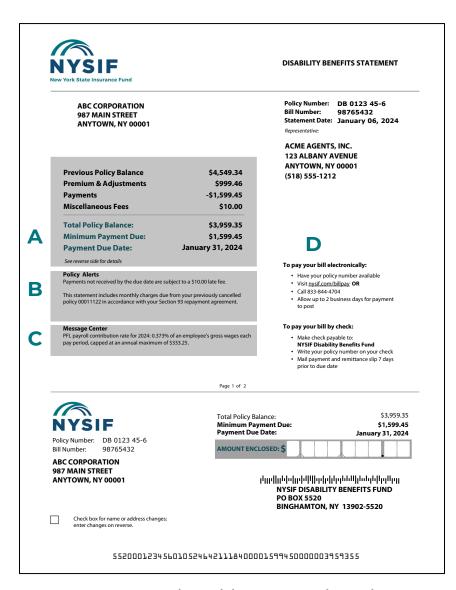


Learn How to Read Your NYSIF Disability Benefits/ Paid Family Leave Bill

Use this sample guide to help you understand your NYSIF bill.

- A. This box displays a billing summary for the current statement period. Your Total Policy Balance reflects the balance from your last bill and payments, adjustments and fees that occurred during the current billing cycle. Itemized transactions for the current period can be found on the reverse side of your bill under New Transactions and Payments. You must pay the Minimum Payment Due by the date shown to avoid a late fee.
- B. Policy Alerts provide important information affecting your policy. On disability benefits new policy and renewal bills, the Policy Alert box will display your annual Disability Benefits and Paid Family Leave premium separately.
- C. The Message Center offers details on NYSIF services and latest news.
- Payment Options. Go to nysif.com/billpay to enroll in AutoPay or pay online by electronic funds transfer, credit or debit card. You can also pay by check using the remittance slip as shown in the example above.



Sample Disability Benefits Bill

Visit <u>nysif.com/mybill</u> for more information & <u>nysif.com/billpay</u> for online payment options.

- **E. Deposit** is the premium deposit required based on initial information in your application or renewal.
- F. Revised Billed Premium reflects any premium deposit adjustment based on new information. This amount must be paid in full.
- **G. Installments** (for policies with payment plans) show remaining installments and current installment due. There is a \$10 installment fee per installment, which is reflected in the Miscellaneous (Misc.) Fees & Credits total.
- **H. Deferred Premium** represents the premium amount due to NYSIF under a separate established payment arrangement. (This is not common.)
- An **Audit Balance** or credit may result from a premium audit. Audit balances of more than \$500 may be paid in installments.

		Sample Disability Benefits Bill
J.	Adjustments reflect changes	,
	made to your total policy balance.	
	Adjustments are itemized under	
	New Transactions and Payments. This ame	ount must be paid in full.

- II. K. Repayment - Section 93 reflects a portion of your previous policy balance which must be paid, per NYSIF's Welcome Back Program Terms and Conditions, in order to continue coverage under your new Policy. The Welcome Back Program allows policyholders to secure workers' compensation coverage with NYSIF while simultaneously paying off a previously cancelled policy balance. If you are a participant in the program and wish to obtain your Section 93 payoff balance, please contact WelcomeBack@nysif.com or call us at 888.875.5790.
- L. Miscellaneous (Misc.) Fees & Credits reflect the sum of installment fees, interest, late payment fees and other charges and credits. There is a \$10.00 late fee for payments received after the due date.
- M. Past Due amounts reflect unpaid charges from your previous bill including prior installments.
- N. Total Policy Balance reflects the balance still owed for all policy periods, including remaining installments.
- O. Minimum Payment Due is the sum of items (E) through (L). This amount must be paid by the due date to avoid late fees and/or nonpayment cancellation.
- P. New Transactions and Payments show all activity for the dates listed.

ABC COR	PORATION				NYSIF
Policy Number: DB 0123 45-6					NISIF
Statement Period: 12/07/23 - 01/05/24					
TOTAL PO	DLICY BALANC	Œ			
DESCRIPTI	ON	BALANCE DETAILS	REMAINING INSTALLMENTS	MINIMUM PAYMENT DUE	
Deposit					
Revised Bille	ed Premium				
Installments		\$2,949.89	4	\$589.99	
Deferred Pre					
Audit Baland					
Adjustment					
	- Section 93	\$999.46		\$999.46	
Misc. Fees &	Credits	\$10.00		\$10.00	The Section 93 repayment amount represents the installment due for y
Past Due	ICY BALANCE	\$3,959.35			previously cancelled policy. To pay to balance in full, call us at 888.875.57
	PAYMENT DUE	43,737.22		\$1,599.45	Pay your minimum amount due of \$1,599.45 by 01/31/2024.
NEW TRA	NSACTIONS A	ND PAYMENTS			
DATE	REF#	DESCRIPTION	N	AMOUNT	
12/19/23	009011	Payment Recei	ved - Thank You	-\$1,599.45	
01/05/24	112676	Repayment ins	tallment - Section 93	\$999.46	
01/05/24	8049889	Installment Fee	2	\$10.00	
If you have			Credits are applied to y ybill for more information or Page 2 of 2	r call Customer Service at 1-	888-875-5790.
				_	Γhank you!