



# Learn About NYSIF's Redesigned Bill

NYSIF is pleased to present our new, simplified bill, which is redesigned to include the details you wanted most. Use this sample guide to help you understand your new bill.

## SAMPLE WORKERS' COMPENSATION BILL


### How to Read Your New Bill

**A** This box displays a billing summary for the current billing 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.

**C** The **Message Center** offers details on NYSIF services and latest news.

**D** NYSIF offers you several **Payment Options**. Go to [nysif.com/billpay](https://nysif.com/billpay) to pay online by electronic funds transfer, credit or debit card, or by phone. You can also pay by check using the remittance slip (right).



**WORKERS' COMPENSATION STATEMENT**

**ACME MANUFACTURING**  
PO BOX 123  
ANYTOWN, NY 00001

Policy Number: G 1234 567-8  
Bill Number: 98765432  
Statement Date: July 01, 2019

Representative:  
**ABC REPRESENTATIVES**  
987 OAK STREET  
ANYTOWN, NY 00001  
(518) 555-1212

Previous Policy Balance	\$34,301.76
Premium & Adjustments	\$23,115.29
Payments	\$0.00
Miscellaneous Fees	\$40.00
<b>Total Policy Balance:</b>	<b>\$57,457.05</b>
<b>Minimum Payment Due:</b>	<b>\$13,700.21</b>
<b>Payment Due Date:</b>	<b>July 14, 2019</b>

See reverse side for details

**Policy Alerts**  
Your payment is past due. Payment of \$13,700.21 must be received by 07/14/2019 to avoid cancellation.

Payments not received by the due date are subject to a \$30.00 late fee.

**Message Center**  
Do you have a NYSIF online account? Registered policyholders can create certificates, search claims and view policy documents such as info pages, audit records, endorsements and more. Visit [nysif.com](https://nysif.com) and click the Log In button in the upper right corner to create an account.


**To pay your bill electronically:**

- Have your policy number available
- Visit [nysif.com/billpay](https://nysif.com/billpay) OR
- Call 1-877-309-6028
- Allow up to 2 business days for payment to post.

**To pay your bill by check:**

- Make checks payable to:  
**NYSIF Workers' Compensation**
- Write your policy number on your check
- Mail payment and remittance slip 7 days prior to due date

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Policy Number: G 1234 567-8

**ACME MANUFACTURING**  
PO BOX 123  
ANYTOWN, NY 00001

Total Policy Balance: \$57,457.05  
Minimum Payment Due: \$13,700.21  
Payment Due Date: July 14, 2019

AMOUNT ENCLOSED: \$

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☐ Check box for name or address changes; enter changes on reverse.

**NYSIF WORKERS' COMPENSATION**  
PO BOX 5238  
NEW YORK, NY 10008-5238

THIS IS NOT AN ACTUAL BILL.  
Sample for illustrative purposes only.

Visit [nysif.com/billpay](https://nysif.com/billpay) for online payment options.

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**E Deposit/Rebill** is the premium deposit required based on initial information in your application. A rebill reflects any premium deposit adjustment based on new information. This amount must be paid in full.

**F 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.

**G** An **Audit Balance** or credit may result from a premium audit. Audit balances of more than \$1,000 may be paid in installments. Unpaid audit balances are charged monthly interest of 1%. Interest charges are included in Miscellaneous (Misc.) Fees & Credits.

**H Adjustments** reflect changes made to your total policy balance. Adjustments are itemized under **New Transactions and Payments**. This amount must be paid in full.

**I Miscellaneous (Misc.) Fees & Credits** reflect the sum of installment fees, interest, late payment fees and other charges and credits.

**J Past Due** amounts reflect unpaid charges from your previous bill including prior installments.

**K Total Policy Balance** reflects the remaining premium balance, including remaining installments.

**L Minimum Payment Due** is the sum of items (E) through (J). This amount must be paid by the due date to avoid late fees and/or nonpayment cancellation.

**M New Transactions and Payments** show all activity for the dates listed.

**N** This amount is the sum of your current installment, your full audit balance, any miscellaneous fees or adjustments that are immediately due and any amount past due.

## SAMPLE WORKERS' COMPENSATION BILL

### ACME MANUFACTURING

Policy Number: G 1234 567-8

Statement Period: 06/01/19 - 07/01/19

#### TOTAL POLICY BALANCE

DESCRIPTION	BALANCE DETAILS	REMAINING INSTALLMENTS	MINIMUM PAYMENT DUE
<b>E</b> Deposit/Rebill			
<b>F</b> Installments	\$34,291.76	5	\$4,898.83
<b>G</b> Audit Balance	\$23,115.29	5	\$3,852.55
<b>H</b> Adjustments			
<b>I</b> Misc. Fees & Credits	\$50.00		\$40.00
<b>J</b> Past Due			\$4,908.83
<b>K</b> TOTAL POLICY BALANCE	\$57,457.05		
<b>L</b> MINIMUM PAYMENT DUE			\$13,700.21

#### M NEW TRANSACTIONS AND PAYMENTS

DATE	REF #	DESCRIPTION	AMOUNT
06/04/19	936148	Audit Premium Adjustment (2/1/18 - 2/1/19)	\$23,115.29
06/28/19	4564462	Late Fee	\$30.00
07/01/19	4617828	Installment Fee	\$10.00

You may pay your audit balance in installments. Please refer to information at the left for the breakdown.

Pay your minimum amount due of \$13,700.21 by 07/14/2019.

**N**

To avoid future interest charges (1% per month) on your unpaid audit balance, you must pay \$32,962.95 by the due date.

Credits are applied to your account.

Visit [www.nysif.com/mybill](http://www.nysif.com/mybill) for more information or call Customer Service at 1-888-875-5790.

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If you have checked the box on the reverse side, please enter new information below.

Thank you!



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Visit [nysif.com/mybill](http://nysif.com/mybill) for more information.