

List of all fees for South Dakota Way2Go Card Prepaid Debit Card

All Fees	Amount	Details
Get Started		
Card purchase	\$0.00	There is no fee to obtain a Card account.
Spend money		
Point-of-sale (POS)	\$0.00	There is no fee for POS purchase transactions conducted in the U.S. using your signature or PIN number.
Get Cash		
ATM withdrawal (in-network)	\$0.00	There is no fee for ATM withdrawals conducted at Comerica, MoneyPass, or Transfund ATM locations. In-network locations can be found at moneypass.com/atm-locator.html , locations.comerica.com/location/atm-s0680432 , and transfund.com/atm_locator/ . When using your card at an ATM, the maximum amount that can be withdrawn from your Card account per calendar day is \$500.00.
ATM withdrawal (out-of-network)	\$1.25	This is our fee. "Out-of-network" refers to all ATMs outside of the MoneyPass, Comerica and Transfund Bank ATM Networks. You will be assessed a fee for each ATM withdrawal conducted at an out-of-network ATM. You may also be charged a fee by the ATM operator, even if you do not complete a transaction. When using your card at an ATM, the maximum amount that can be withdrawn from your Card account per calendar day is \$500.00.
Teller-assisted cash withdrawal (OTC)	\$0.00	There is no fee for teller-assisted cash withdrawals conducted at Mastercard Member Bank or Credit Union teller windows.
Information		
ATM balance inquiry	\$0.00	There is no fee for ATM balance inquiries. You may be assessed a fee by the ATM operator for out-of-network balance inquiries.
Customer service (automated or live agent)	\$0.00	You are allowed unlimited calls to the Customer Service Interactive Voice Response (IVR) for no fee each month to check your balance or hear your transaction history.
Using your card outside the U.S.		
International ATM withdrawal	\$1.25	This is our fee. You will be assessed a fee for each ATM withdrawal conducted outside of the U.S. You may also be charged a fee by the ATM operator, even if you do not complete the transaction. International transaction fee also applies.
International transaction fee	3%	Conversion rate is a Mastercard fee for each transaction amount conducted outside of the U.S.
Other		
Bill pay	\$0.00	Bill payment services are available via the GoProgram.com website.
Card replacement	\$0.00	There is no fee to replace your Card sent by regular mail. Standard delivery (7 to 10 calendar days).
Expedited card delivery	\$10.00	If you request your replacement card to be expedited rather than receiving it by regular mail, you will be assessed the expedited card delivery fee, in addition to any applicable card replacement fee. Expedited card delivery can be expected within 3 to 5 calendar days.
Funds transfer via Interactive Voice Response (IVR-phone) or web portal	\$0.00	There is no fee for you to transfer funds from your card account to a U.S. bank account owned by you.
Inactivity Fee	\$2.00	This is our fee. After 12 consecutive months of inactivity, following the activation of your Card, we will assess the fee in the month following the 12 month period of inactivity, and each consecutive month of inactivity, thereafter. Inactivity is defined as no deposits, purchases, calls to the automated or live customer service, cash withdrawals, ATM balance inquiries, or fund transfers for 12 consecutive months. The inactivity fee will not be charged after the Card account balance reaches zero (\$0.00) or after the Card account begins to have activity.

Your funds are eligible for FDIC insurance and will be held at or transferred to Comerica Bank, an FDIC-insured institution. Once there, your funds are insured up to \$250,000 by the FDIC in the event Comerica Bank fails, if specific deposit insurance requirements are met. See fdic.gov/deposit/deposits/prepaid.html for details.

No overdraft/credit feature.

Contact Go Program Customer Service by calling 1-844-893-3124, by mail at P.O. Box 245997, San Antonio, TX 78224-5997 or visit www.GoProgram.com.

For general information about prepaid accounts, visit cfpb.gov/prepaid.

If you have a complaint about a prepaid account, call the Consumer Financial Protection Bureau at 1-855-411-2372 or visit cfpb.gov/complaint.

South Dakota Way2Go Card Prepaid Card issued by Comerica

You do not have to accept this prepaid card.
Your State Agency also offers direct deposit to your bank account.
Choose the option that is best for you.

Monthly fee	Per purchase	ATM withdrawal	Cash reload
\$0	\$0	\$0 in-network	N/A
		\$1.25* out-of-network	

ATM balance inquiry	\$0
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Customer service (automated or live agent)	\$0
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Inactivity (after 12 months with no transactions)	\$2.00 per month
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The Way2Go Card charges 3 other types of fees. They are:

Card replacement (regular or expedited delivery)	\$0 or \$10.00*
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Int'l transaction (excl. ATM withdrawal & balance inquiry fees)	3% of the transaction amount
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Int'l ATM withdrawal	\$1.25 per withdrawal
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* This fee can be lower depending on how and where this card is used. See separate disclosure for ways to access your funds and balance information for no fee.

No overdraft/credit feature.

Your funds are eligible for FDIC insurance.

For general information about prepaid accounts, visit cfpb.gov/prepaid.

Find details and conditions for all fees and services in the card terms and conditions.

**SOUTH DAKOTA MEDICAID
NON-EMERGENCY MEDICAL TRAVEL (NEMT)
PAYMENT AUTHORIZATION FORM**

Mail, Fax or Email the completed form to:

DSS - EBT/NEMT
700 Governors Drive
Pierre, SD 57501-2291
Phone: 1-866-403-1433
Fax: 605-773-8461

Email: dss.ebtstateoffice@state.sd.us

SELECT ONE:

- This is the first time I have completed an NEMT Payment Authorization form.
- I have already completed an NEMT Payment Authorization form and want to make changes to the following:
 - Name Change
 - Address Change
 - Telephone Change
 - Change the way I receive my NEMT payments (Direct Deposit or NEMT Payment Card)

NOTE: You must complete a separate payment Authorization form for each program in which you receive payments. The information provided on this form will only be used for NEMT purposes.

PAYEE INFORMATION: (The person listed below must be an adult.)

Name: Mr. Mrs. Ms.

Mailing Address:

City: _____ State/Zip: _____

Telephone Number: _____ Alternative Telephone Number: _____

Date of Birth: _____ Social Security Number / Tax ID Number: _____

ELECTRONIC PAYMENT OPTIONS (SELECT ONLY ONE)

Direct Deposit **NEMT Payment Card (Debit Card)**

By selecting the box above: I authorize the Department of Social Services to credit my NEMT payments to the account listed below, and if necessary, reverse any incorrect credit entries made in error. I acknowledge that a new enrollment form must be completed if I choose to change financial institutions or account numbers.

Simply fill out the Payee Information section at the top of the page, sign and return as instructed above. Your card will arrive in the mail within 7-10 business days. Your payments will automatically be deposited to your card.

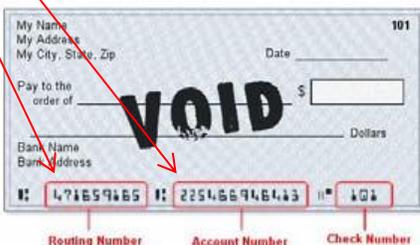
Bank Name: _____

Routing Number: _____

Account Number: _____

Type of Account: Checking Savings

NOTE: To help the government fight the funding of terrorism and money laundering activities. Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.



Remember to attach a voided check or a copy of a voided check to this form, or a letter from your financial institution that includes your account and routing number. **Deposit Slips and counter checks will NOT be accepted.**

Signature: _____ Date: _____