

Employee Authorization for Payroll Deduction To Health Savings Account

This form is for employees who want to have money withheld from their paychecks by their employer and deposited into their health savings account (HSA) on a pre-tax basis. Not all employers can arrange for payroll deductions, so check with your payroll department before submitting this form. **You must be enrolled in a consumer-directed health plan (CDHP) with an HSA before you can start a payroll deduction.**

I wish to:

Begin a new deduction Change my deduction Stop my deduction Effective Date _____

Section 1: Employee Information

Name _____

(Last, First, Middle initial)

Mailing address _____

City/State/ZIP Code _____

Section 2: Per-Paycheck Contribution to Your HSA

I elect to contribute \$_____ per paycheck to my health savings account (HSA). This request replaces any previous payroll deduction requests for my HSA.

Section 3: Employee's Signature Required

By signing this form, I am requesting that payroll deductions be started or changed as shown in Section 2 above and agree to the preceding terms. I understand there are maximum limits I can contribute to my HSA per IRS rules and I may be liable for tax penalties if I exceed this amount.

Employee's signature

Date

Return this form to your personnel, payroll, or benefits office. Keep a copy for your records.