

# Payroll Deduction Authorization

## for Health Savings Accounts (HSAs)

By contributing to your health savings account (HSA), you're saving money on your medical expenses and investing in a happy, healthy future. Use this form to notify your employer how much to deduct from your paycheck as an HSA contribution.

### 2020 HSA Contribution Limits:

Single Coverage <i>You are the only person covered by your health plan</i>	\$3,550 <i>Including any employer contribution</i>
Family Coverage <i>Someone besides you is also covered by your health plan</i>	\$7,100 <i>Including any employer contribution</i>

- If you are **age 55 or older** at any time during the year, your contribution limit is increased by \$1,000.
- If you are not HSA-eligible for the full calendar year, prorate your annual contribution limit based on the number of **full months** you are HSA-eligible.

Here's how those numbers break down by different pay periods:

### Contribution Limits by Pay Period:

	\$3,550 Single Coverage	\$7,100 Family Coverage
Monthly (12 pay periods)	\$295.83	\$591.67
Twice per month (24 pay periods)	\$147.92	\$295.83
Every other week (26 pay periods)	\$136.54	\$273.08

I authorize my employer to deduct (amount) \$ \_\_\_\_\_ per pay period from my paycheck.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Employee ID: \_\_\_\_\_

Date: \_\_\_\_\_

Return completed form to HR Manager/Employer. Please do not send to HealthSavings.