



1300 North Main Street  
Nappanee, IN 46550  
(574)773-3131  
(574) 773-5593 FAX

**HEALTH SAVINGS ACCOUNT PAYROLL DEDUCTION FORM**

Establish Payroll Deduction for First Time  
Change Payroll Deduction Amount  
Stop Payroll Deduction

**PERSONAL INFORMATION (PLEASE PRINT)**

Employee Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Phone: \_\_\_\_\_ DOB: \_\_\_\_\_

The IRS has established annual limits that can be contributed to a Health Savings Account (HSA). For 2020, you may contribute \$3,550 Employee Only and \$7,100 Family, less the employer contribution to your HSA.

Catch up contributions are allowed for individual's age 55 (or who turn age 55 during the calendar year) and older, but not eligible for Medicare. Catch up contributions are limited to a maximum of \$1,000 for 2020. If you elect the HSA plan after January 1, 2020, and elect to contribute up to the maximum the IRS allows, you must remain enrolled in the HSA Medical plan for twelve months.

I am age 55 or older and would like to contribute an additional \$1,000 for the 2020 plan year.

**PAYROLL DEDUCTION**

Elect the amount you wish to contribute to your Health Savings Account per pay period.

Annual Deduction Amount:		
18 Pays		
24 Pays		

Authorization

I authorize the pre-tax reduction of my salary on a per paycheck basis, by the amount designated above.

Signature: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_