Health Equity

Employee HSA Payroll Deduction Form

Plan Year – January 1, 2022 thru December 31, 2022

2021 Annual HSA Contribution Maximums	
Coverage Type	Total Annual Maximum Contribution*
Self-Only	\$3,650
Family	\$7,300

^{*}Catch-up contribution (age 55+): additional \$1,000/year

Total Elected Amount	/	Number of pay periods		Per Pay Period Withholding
	Divided by	26	=	

Eligibility and contribution limits to your health savings account (HSA) are determined by the effective date of your high deductible health plan (HDHP). If you're covered as of December 1, you're considered an eligible individual for the entire year and you're not required to pro-rate your contributions. If you cease to be an eligible individual during the next calendar year, any funding over the prorated amount is considered an excess contribution and subject to a penalty and income tax. For further information or to review eligibility, please contact HealthEquity Member Services at 866.346.5800.

Employee Information and Authorization (please write legible)

Employee Name	
Please withhold HealthEquity HSA.	from my bi-weekly payroll and apply the funds to my
Signature	
Date	