



HEALTH SAVINGS ACCOUNT (HSA) PAYROLL DEDUCTION AUTHORIZATION

SECTION A: EMPLOYEE IDENTIFICATION (please print)

NAME (LAST, FIRST, MI)	EMPLOYEE ID
EMAIL ADDRESS	CONTACT PHONE NUMBER

SECTION B: EMPLOYEE VOLUNTARY CONTRIBUTION

New contribution	Change contribution	Are you enrolled in
Indicate below the TOTAL DOLLAR AMOUNT you want to contribute by the end of the 20__ calendar year.		
COVERAGE LEVEL (select one) Employee Employee + Adult Employee + Child Family	I elect a calendar year employee pre-tax contribution of \$_____. For IRS contribution limits, refer to the Benefits Guide Health . New enrollments and changes will be effective the first day of the pay period following receipt of a completed authorization form. <i>This authorization remains in effect until a new authorization is received or coverage in the HDHP plan ends.</i>	

I affirm the following statements:

- I am enrolled in a HDHP with HSA Plan, have no other medical coverage. I am not participating in the Healthcare Flexible Spending Account and know that I may participate in the Limited Healthcare Flexible Spending Account for reimbursement of out-of-pocket dental and vision expenses.
- I understand, if I am enrolled in an HSA Plan and have any active part of Medicare or Tricare plan, I may be subject to IRS tax penalties.
- I am eligible to open and contribute to a health savings account.
- I authorize Arizona State University to deduct from my pay the above-identified contribution and forward it to my Optum health savings account.
- I understand it is my responsibility to manage my HSA contributions in accordance with federal guidelines based on my eligibility and the eligibility of my dependents.
- I understand that failure to observe IRS contribution limits and to use my HSA funds for nonqualified expenses may result in tax penalties.

Employee's Signature: _____ Date: _____

Submit the completed and signed form by one of the following secure methods:

Email to HumanResources-Benefits@exchange.asu.edu OR eFax to HR Benefits 480-993-0007.

- You must use your ASU email account (asu.edu).
- You must type [SECURE] in the subject line, including the square brackets.
- Do not forward or copy others on the email.
- This box does not send replies or responses to inquiries.