

# US Bank HSA Payroll Deduction Form

Individuals who elect the High Deductible plan and who meet the IRS eligibility requirements have the option to enroll in a Health Savings Account (HSA). Although you are not required to use US Bank for your HSA, you are required to use them if you want your contributions automatically deducted pre-tax from your payroll or you want to use the excess City Medical Contribution towards an HSA. If you would like to enroll in an HSA thru US Bank, please fill out the information below. Once your information is uploaded by the City of Helena to US Bank, you will receive a HSA Welcome Kit in the mail. Included in the Kit are instructions to activate your account and other information that you will need to set up and activate your personal account. HSA accounts thru US Bank have a \$20 per year service fee that you will be responsible for.

Name: \_\_\_\_\_  
**LEGAL First, Middle Initial and Last Name**

Street Address: \_\_\_\_\_

Mailing Address if different: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Date of Hire: \_\_\_\_\_

E-mail address (home or work): \_\_\_\_\_

\* See Table below for guidance.

The annual amount elected will be divided equally among your payroll periods (make sure annual amount is divisible by 24 if contribution is for the full plan year).

Employee contribution per pay period \$ \_\_\_\_\_ and City contribution per pay period \$ \_\_\_\_\_.

I elect an annual contribution of \$ \_\_\_\_\_ (both employee & City contribution) for plan year 2015-2016.

The table below shows examples of the amount you would need to contribute each payroll period in order to reach various annual contribution amounts. When calculating maximum, include any amount that may be contributed by the employer.

	Annual	Payroll Withholding			
	Contribution	Weekly	Bi-Weekly	Semi-Monthly	Monthly
	<b>\$ 500.00</b>	\$ 9.62	\$ 19.23	\$ 20.83	\$ 41.67
	<b>\$ 1,000.00</b>	\$ 19.23	\$ 38.46	\$ 41.67	\$ 83.33
	<b>\$ 1,500.00</b>	\$ 28.85	\$ 57.69	\$ 62.50	\$ 125.00
	<b>\$ 2,000.00</b>	\$ 38.46	\$ 76.92	\$ 83.33	\$ 166.67
	<b>\$ 2,500.00</b>	\$ 48.08	\$ 96.15	\$ 104.17	\$ 208.33
CY 2015 Single Maximum	<b>\$ 3,350.00</b>	<b>\$ 64.42</b>	<b>\$ 128.84</b>	<b>\$ 139.58</b>	<b>\$ 279.17</b>
	<b>\$ 3,500.00</b>	\$ 67.31	\$ 134.62	\$ 145.83	\$ 291.67
	<b>\$ 4,000.00</b>	\$ 76.92	\$ 153.85	\$ 166.67	\$ 333.33
	<b>\$ 4,500.00</b>	\$ 86.54	\$ 173.08	\$ 187.50	\$ 375.00
	<b>\$ 5,000.00</b>	\$ 96.15	\$ 192.31	\$ 208.33	\$ 416.67
	<b>\$ 5,500.00</b>	\$ 105.77	\$ 211.54	\$ 229.17	\$ 458.33
CY 2015 Family Maximum	<b>\$ 6,650.00</b>	<b>\$ 127.88</b>	<b>\$ 255.77</b>	<b>\$ 277.08</b>	<b>\$ 554.17</b>

**\*Contributions Limits:** Your annual HSA contribution can not exceed the statutory IRS contribution maximums. If you are age 55 or older, you can also make additional "catch-up" contributions.

See Department of Treasury website for more details. <http://www.treasury.gov/resource-center/faqs/Taxes/Pages/Health-Savings-Accounts.aspx>

By signing this form, I authorize my employer to deduct the elected amount from my pay on each pay date. I hereby consent that all personal information and selections made are correct.

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

**Please return your completed form to the HR Department.**

**DISCLAIMER:** HSAs are personal health savings vehicles rather than group employee benefits. Although your employer has agreed to forward contributions through its payroll system to U.S. Bank, it has not specifically endorsed U.S. Bank or any other HSA provider. You are not restricted from moving funds to another HSA, but your employer is not required to forward payroll contributions to another HSA provider. With respect to HSAs offered through U.S. Bank, employers may not impose conditions on the use of HSA funds, make or influence any investment decisions with respect to funds contributed to an HSA, or receive any payment or compensation in connection with an HSA.