



HUMANA.

**HEALTH SAVINGS ACCOUNT (HSA)
PAYROLL DEDUCTION CHANGE FORM**

To make a change in your voluntary HSA contribution, please complete this form and return it to the Benefits Office **no later than the 10th of each month** (if the 10th is a holiday or a weekend the form must be received by the last work day immediately preceding the 10th).

Form can be scanned and emailed to Tammy Boyett; faxed to 254-755-9423; or put in school mail or delivered in person to the Benefits Office.

- Employees may make changes to their HSA account only one time per month.
- Forms turned in after the 10th of the month will not be effective in your paycheck until the following month.
- Once the change in deduction has been made to your paycheck, the new funds will not be in effect until the first of the following month (i.e. change made in June paychecks will not be reflected in your HSA account balance and funds will not be available until July).
- Funds are generally deposited to your HSA account within 7 to 10 business days after the last paycheck of each month and are not available for use until posted to your HSA account.

NEW CONTRIBUTION PER PAYCHECK AMOUNT:

\$ _____ *

I want to make the above change in contribution to my HSA.

Employee Name: _____

Employee ID Number: _____

Signature: _____ Date: _____

For Benefits Office Use Only

Date Received in Benefits Office: _____ Received By: _____

Date Deduction Changed: _____ Entered By: _____

Change Effective Date: _____

***Total Annual Contribution Cannot Exceed:
\$3,250 for Individual Coverage or
\$6,450 for Family Coverage**