Pima County

Health Savings Account Payroll Deduction Authorization

2014

JP Morgan Chase

Please Print or Type

Pima County Employee ID# _____

Name _____ _____
(Last, First MI) (HiOrg)

Address _____ Date of Hire _____

City _____
State, Zip

2014 Annual Combined Maximums are: **Employee Only $3,300; Employee/Dependents $6,550**
Employees over 55 may contribute an additional $1,000

Bi-Weekly County Contributions **Employee Only $38.46; Employee/Dependents $76.92**

Effective – Pay Period Ending _____
mm/dd/yyyy

	Per Pay Period Deduction	
Pre-tax - Employee Only	$ _____	Limit $88.46
Pre-tax - Employee + Dependents	$ _____	Limit $175.00
Pre-tax - Over 55 Catch Up	$ _____	Limit $38.46

☐ **I do not wish to contribute to my Health Savings Account at this time.**

I am HSA eligible and enrolled in Pima County's high deductible health plan with no other medical coverage. I authorize the above stated bi-weekly payroll deductions to be withheld from my paycheck and forwarded to my Health Savings Account with JP Morgan Chase. I understand that the County will contribute based solely on my level of coverage. It is my responsibility to manage my contributions in accordance with federal guidelines based on my eligibility as well as my dependents. I also understand that in order to avoid tax consequences, it is my responsibility to ensure that claims drawn from this account are eligible medical expenses with substantiated receipts.

Employee's signature: _____ Date _____

Return form to your Departmental Benefits Representative