

Health Savings Account Payroll Deduction

I, hereby authorize East Central College to

(Please print name)

deduct $ per pay period.

I, hereby authorize East Central College to

(Please print name)

cancel my payroll deduction.

This authorization will remain in force until written notification is received from the employee to change or cancel the signed agreement.

Signature: Date:

Effective Date:

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| If you are enrolled in the High Deductible plan and wish to contribute to your health savings account, the charts below list the contribution amounts to reach IRS maximum; however, you can specify any amount up to the maximum contribution limit listed below. | | | | | | | | |
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| **Blue Access Choice (BAC)**  **BJC Network** | | | | | |
| **2018 IRS Max Contribution to H.S.A.** | | **Individual - $3,450** | | **Family - $6,900** | |
| ECC Contribution | | $ 2,167.20 | | $ - | |
| Employee Contribution | | $ 1,282.80 | | $ 6,900.00 | |
| Per pay period (24) | | $ 53.45 | | 287.50 | |
| Per month | | $ 106.90 | | 575.00 | |
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|  | |  | |  | |
| **Blue Preferred Select (BPS)**  **Non-BJC Network** | | | | | |
| **2018 IRS Max Contribution to H.S.A.** | | **Individual - $3,450** | | **Family - $6,900** | |
| ECC Contribution | | $ 2,491.92 | | $ - | |
| Employee Contribution | | $ 958.08 | | $ 6,900.00 | |
| Per pay period (24) | | $ 39.92 | | 287.50 | |
| Per month | | $ 79.84 | | 575.00 | |
|  | |  | |  | | |
| Age 55+ can contribute an additional $1000 into a H.S.A. | | | | | | |