

## Health Savings Account Deduction Form 2025

Effective the 1st of \_\_\_\_\_2025

Date

Health Savings Account (HSA	<b>A</b> )				
expenses and prescriptions. Trur year and \$2,000 for family cover You may use available funds in	nan State University contribute rage per year. Qualified medica your HSA first to pay the cost	our tax-free contributions to use the sto your HSA in the amount of all expenses are defined by International covered health expenses and per in-network providers, you may	\$1,000 for indival Revenue Cod rescriptions with	vidual coverage per le Section 213 (d). hout incurring a	
<b>Employee Information:</b>					
Name (Please Print)		Social Security Number	Banner ID Number		
			_	_	
Date of Birth		Hire Date	9-month 12-month Pay Schedule		
Date of	Birui	Time Bate	Tay	Schedule	
Street		City	ST	Zip	
Home Phone		Work Phone			
Maximum Allowable to Cont	ribute:				
Maximum Allowable	Individual	Individual Coverage		Family Coverage	
IRS Guidelines	\$4,3	800*	\$8,550*		
Maximum you can contribute with  Truman State University's contribution \$3,3		300	0 \$6,550		
*There is a \$1,000 catch-up contribu			Ψ0,33	0	
<b>Authorized Deductions from</b>	· ·				
Authorized Deductions Iron	your payencex.				
	Deduct from each paycheck	#of Paychecks in 2024	Ann	ual Amount	
Individual Coverage					
Family Coverage					
Authorized Signature:					

Signature