Health Savings Account (HSA)

What are they?

- *HSA's are tax-advantaged medical savings accounts available to taxpayers who are enrolled in an HSA qualified high-deductible health plan.
- * The funds contributed to the account are not subject to federal income tax at the time of deposit.
- *Unused amounts in one year can be carried over to the following years and added to subsequent contributions.

HSA Contribution Limits:

*Individual: \$3550 for 2020

*Family \$7100 for 2020

*Individuals age 55 and over may make an additional "catch up" contribution of up to \$1000.00.

*A married couple can make two "catch up" contributions as long as both spouses are at least 55 and enrolled in the HSA health plan.



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Opening Your Centra HSA Account- What You Will Need

If you are not currently a Centra Credit Union member (have a Centra account), Please bring the following when you open your HSA:

- •\$5.00 opening deposit-cash or check
- Two pieces of ID- one needs to be a photo ID; one can be from the Primary ID List below and one from the Secondary ID list below

Primary ID (one of these):

- Current state driver's license
- Current passport with photo
- State ID with photo
- Government ID card for employees with photo
- Military ID with photo

Secondary ID (one of these):

- Insurance card (health or car)
- · Credit or Debit card
- SSN card or ITIN documentation (not a card)
- Vehicle Registration
- Alien Registration ID card
- Matricula card
- Property tax bill
- Law enforcement ID
- Driver's License other than U.S.
- Utility bill (must have current name and address)
- Payroll stub (must have current name and address)
- Other financial institution statement (must have current name and address)
- A secondary primary form of ID

If the address on your primary ID is not current, please be ready to present one of the following:

- A utility bill with your correct address
- A payroll stub with your correct address
- · Lease or mortgage documents with your current address

You will be asked to provide the following information:

Name

Social Security Number

Address

Birthdate

Telephone

Mother's Maiden Name

Email Address

Joint Owner Information

If you are already a Centra member, please be ready to present one photo ID



BARTHOLOMEW CONSOLIDATED SCHOOL CORPORATION Payroll Deduction Form – HSA

Last Name	First Name	Middle Name	Social Security#
		(if used)	
I hereby request tha pay each pay perio source.	t \$be deduct d. If I am paid from mult	ed from my pay. I understa iple sources, the deduction	nd this will be deducted from my a only comes out of my primary
This is a ch	ange to an existing	deduction authori	zation
This is a n Centra memb	ew deduction autler account card):	norization (please	attach a copy of your
• If this is a n	new HSA Checking Account	nt, please complete the follo	owing MICR number:
• If this is a n	ew HSA Savings Account	, please complete the follow	ving Account number:
			- 3 0
the deduction. Char	will continue in effect unti- nges can be made April 1, the form in at least a week	July 1, Oct. 1 and Jan. 1 of	nuthorization to change or cancel f any year effective with the next
EMPLOYEE SIG	NATURE	D	ATE
Return to: Heather Downin, A	Admin Building		

376-4203 downinh@bese.k12.in.us